















BANK CHALLAN

TANDOJAM

Manager

Casher

SINDH AGRICULTURE UNIVERSITY

Date : _____









Bank Copy

BANK CHALLAN SINDH AGRICULTURE UNIVERSITY **TANDOJAM**

Date :		
Challan No :		
Non -Refundable For the Credit of: SAU Director ITC A/C 00847901060403		
at ANY HBL Branch		
Branch Name:		
Branch Code:		
Reg no/Rollno:		
Student Name:		
Father:		
CNIC:		
Faculty:		
Department:		
Batch:		
Class:		
Semester/Term:		
Regular:		
Late Fees		
Total Amount		
Amount in words		
Manager Casher		







Treasurer Copy

BANK CHALLAN SINDH AGRICULTURE UNIVERSITY TANDOJAM

Date :		
Challan No :		
Non -Refundable For the Credit of:		
SAU Director ITC A/C 00847901060403		
at ANY HBL Branch		
Branch Name:		
Branch Code:		
Reg no/Rollno:		
Student Name:		
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Faculty:		
Department:		
Batch:		
Class:		
Semester/Term:		
Regular:		
Late Fees		
Total Amount		
Amount in words		

Manager

Casher



Department Copy

Student Copy **BANK CHALLAN**

SINDH AGRICULTURE UNIVERSITY **TANDOJAM**

Date : _____

Challan No :	Challan No :
Non -Refundable For the Credit of: SAU Director ITC A/C 00847901060403	Non -Refundable For the Credit of: SAU Director ITC A/C 00847901060403
at ANY HBL Branch	at ANY HBL Branch
Branch Name:	Branch Name:
Branch Code:	Branch Code:
Reg no/Rollno:	Reg no/Rollno:
Student Name:	Student Name:
Father:	Father:
CNIC:	CNIC:
Faculty:	Faculty:
Department:	Department:
Batch:	Batch:
Class:	Class:
Semester/Term:	Semester/Term:
Regular:	Regular:
Late Fees	Late Fees
Total Amount	Total Amount
Amount in words	Amount in words

Manager

Casher