Paying – in Voucher

University of Peradeniya

**People’s Bank - Peradeniya - C/A/NO: 057100121338023**

**Bank of Ceylon - Peradeniya - C/A/NO: 0001273343**

Paid to credit of Current Account No : .....................................................................................................

1. Full Name of student (In Block Letters) Rev/Mr./ Miss : ....................................................................
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2. Registration No : .........................................................................................................................
3. Name of Degree : ............................................................................................................
4. Year: ........................................................ Term / Semester...........................................
5. Name of the Hall: .......................................................................................................................
6. Amount in Word: .......................................................................................................................
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Revenue Head Rs. Cts.

1. Hall Fees / Room Rent 10 07 01 00 ................... ............
2. Fines / Damages 10 05 11 00 ................... ............
3. Hand Book 10 05 11 00 ................... ............
4. Registration Fees 10 06 01 01 ................... ............
5. Medical Fees 10 06 06 01 ................... ............
6. Certificate Fees 10 06 03 04 ................... ............
7. Convocation Fees 10 06 03 03 ................... ............
8. Library Fines 10 06 05 01 ................... ............
9. Exam Fees 10 06 03 01 ................... ............
10. Vacation Res. Fees 10 07 01 02 ................... ............

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Date: ............................ Signature of Depositor

Received by cash the above sum to the credit of **CA NO: 057100121338023 ,** C**A NO: 0001273343**, of the University of Peradeniya at the People’s Bank / Bank of Ceylon, Peradeniya

Date: ................................. ....................................................

 Authorized Officer