

PAY IN SLIP(POSTOFFICE COPY)



**Biller Id : 8141**

APPLICATION FEE PAYABLE AT ALL  
DESIGNATED POST OFFICE



710058411

Name of the Candidate: PRABAKARAN

Application No: 710058411

Notification No: 10/2017

Phone No: 9585317729

Date of Birth: 24-03-1993

Exam Fee	: Rs. 100.00/-
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Service Charges	: Rs. 12.00/-
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Total	: Rs. 112.00/-
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Amount: 112.00

Amount in words : (Rupees .....  
..... only)

Name of the receiving branch .....

Signature of the Candidate

**To be filled by the Post Office:**

Ref No :

Branch Name :

Challan No :

Signature of the Authorised Official  
with Branch Seal

Date :

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