

Request Token - XG651 Request URL - <https://govpay.lk/government/request/XG651>

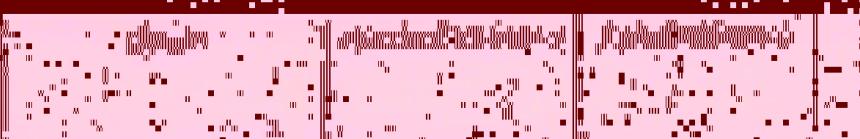
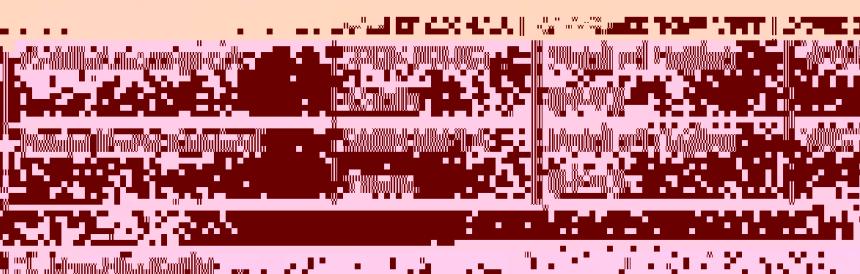
GOV.LK

LCPI FORM NO 280E

Organization Address	Main Street Colawathidara
Organization Telephone Number	0232051660
Organization E-mail Address	dsmusali@yahoo.com
Primary Contact	Name K.Kavinthan Contact Number 0774679829 Email Address kavinthanreddy@gmail.com

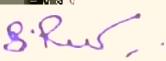
2. Service Details

Service Name	Reference Number Format to Identify the Payment	Bank Name	Account Number



M.R.M.Asam	0716061844	12asamriyas@g mail.com	Management Service Officer	
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4 Organization Approving Authority (Rubber Stamp required) - XG651

Authorizing Officer's Name	S.Rajiev
Authorizing Officer's Designation	Divisional Secretary
Authorizing Officer's Signature	 S. RAJIEV Divisional Secretary Divisional Secretariat Musali
Date	1 2 1 1 2 0 2 5

3. To be Filled by LankaPay Operations Department

Institution Maintenance