



to be paid at any  
STATE BANK OF  
INDIA

**CHALLAN**  
BANKER'S COPY

Dr. Abdul Haq Urdu University  
Kurnool, Andhra Pradesh.

**APPLICATION CHALLAN**

Date: \_\_\_/\_\_\_/2019

Credit to the Account of The  
REGISTRAR,  
Dr. Abdul Haq Urdu University  
Kurnool. Andhra Pradesh.

**62474614715**

Name of the Applicant

To which Department  
Applied

Year

\* Mobile No:

Fee Particulars :

AMOUNT (Rs.)

Application Fee

300/-

Bank Charges

59-00

Total

359/-

(Rupees in words: \_\_\_\_\_  
\_\_\_\_\_)

Signature of the Applicant

To be filled by the Bank:

Branch code: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Bank Seal

Signature of  
Authorized officer



to be paid at any  
STATE BANK OF  
INDIA

**CHALLAN**  
UNIVERSITY COPY

Dr. Abdul Haq Urdu University  
Kurnool, Andhra Pradesh.

**APPLICATION CHALLAN**

Date: \_\_\_/\_\_\_/2019

Credit to the Account of The  
REGISTRAR,  
Dr. Abdul Haq Urdu University  
Kurnool. Andhra Pradesh.

**62474614715**

Name of the Applicant

To which Department  
Applied

Year

\* Mobile No:

Fee Particulars :

AMOUNT (Rs.)

Application Fee

300/-

Bank Charges

59-00

Total

359/-

(Rupees in words: \_\_\_\_\_  
\_\_\_\_\_)

Signature of the Applicant

To be filled by the Bank:

Branch code: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Bank Seal

Signature of  
Authorized officer



to be paid at any  
STATE BANK OF  
INDIA

**CHALLAN**  
APPLICANT COPY

Dr. Abdul Haq Urdu University  
Kurnool, Andhra Pradesh.

**APPLICATION CHALLAN**

Date: \_\_\_/\_\_\_/2019

Credit to the Account of The  
REGISTRAR,  
Dr. Abdul Haq Urdu University  
Kurnool. Andhra Pradesh.

**62474614715**

Name of the Applicant

To which Department  
Applied

Year

\* Mobile No:

Fee Particulars :

AMOUNT (Rs.)

Application Fee

300/-

Bank Charges

59-00

Total

359/-

(Rupees in words: \_\_\_\_\_  
\_\_\_\_\_)

Signature of the Applicant

To be filled by the Bank:

Branch code: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Bank Seal

Signature of  
Authorized officer