

UNIVERSITY OF VAVUNIYA, SRI LANKA. Student's Reg. No:
PAYING IN VOUCHER

1) Name of Payer:

2) Payer's Address:

3) **Reason for Payment**

	Rs.	Cts.
a)		
b)		
c)		
Total		

4) Total Amount (in words) Rs.

..... Cts.

5) Mode of payment : Cash / Cheque / Money Order / Postal Order No.

6) Remarks.....

7) Date.....

.....
Signature of Payer

(For the use of the Shroff of the Receiving Department only)

Received the above amount

Receipt No.

Shroff:

Date:

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