



# Dr. D. Y. Patil Vidyapeeth, Pune

(Deemed to be University)

Pimpri, Pune - 411 018

## Statement

Statement showing the details of the examination fees paid by students for the examination to be held in Second half of the year – 2019

Name of the College : -

Name of the Faculty :

Name of the Examination : -

Sr. No. (1)	Name of the Student (2)	PRN (3)	Students (4)		No. of Subjects offered (5)	Fees per subject (6)	Exam. fees receivable as per the number of subjects			Actual fees Received (10)	Payment Information	
			g.	Rep			Actual fees (7)	Late fees (8)	total (7+8)=(9)		Instrument No. (11)	Date (12)
<b>total</b>	-											

Signature

Dean/Principal/Director of the College/Institute

Place : Pimpri Pune-18

Date : / /2019

**Note :- A separate sheet be prepared examination wise.**

**Summary sheet of collection of Examination Fee**

Prescribed format showing the details of examination fees to be handed over to Dr. D. Y. Patil Vidyapeeth, Pimpri, Pune.

Name of the College: - \_\_\_\_\_

Address : - \_\_\_\_\_

College Code No : - Examination to be held in month \_\_\_\_\_ Year \_\_\_\_\_

Sr. No.	Name of the Faculty	Name of Examination	No. of Students	total Amount
total :				

**Signature**

Dean / Principal / Director of the College / Institute

Place : Pimpri, Pune-18

Date : / /2019

**[Note:-Facultywise detail students list with their payment information is to be prepared.]**

**For office use only**

**(Examination Section)**

Received.....from

(Name of the college)

The above statements alongwith the Statement of Examination fees at the Examination Section of the Vidyapeeth on ...../..../2019

Place :Pimpri, Pune – 411 018

Date : ...../..../2019

**Signature of the Receiver**

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**For office use only**

**(Account Section)**

Received from the Examination Section of the Vidyapeeth, the above statement of Examination fees at the Account Section of the Vidyapeeth on ...../..../2019

**Signature of the Receiver**

Place : Pimpri, Pune-18

Date : / /2019