

UNIVERSITY OF KARACHI

Deposit Slip

Bank _____ Branch _____ Branch Code _____

EXAMINATION COPY

Choose the Purpose

Retotalling Fee (5506)



Voucher # _____

Date _____

NAME _____

FATHER'S NAME _____

CNIC # _____

Mobile / Contract No _____

Permanent Address _____

Department / Institute _____

Class _____

Amount _____

HBL 00427991786203

MCB 0699158531002556

NBP 4100064357

UBL 114601004234

Sindh Bank 3734868282000

Mode of Payment Cash

Instrument

Instrument # _____

Authorized Signature

Depositor's Signature

UNIVERSITY OF KARACHI

Deposit Slip

Bank _____ Branch _____ Branch Code _____

FINANCE COPY

Choose the Purpose

Retotalling Fee (5506)



Voucher # _____

Date _____

NAME _____

FATHER'S NAME _____

CNIC # _____

Mobile / Contract No _____

Permanent Address _____

Department / Institute _____

Class _____

Amount _____

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Instrument # _____

Authorized Signature

Depositor's Signature

UNIVERSITY OF KARACHI

Deposit Slip

Bank _____ Branch _____ Branch Code _____

DEPOSITOR COPY

Choose the Purpose

Retotalling Fee (5506)



Voucher # _____

Date _____

NAME _____

FATHER'S NAME _____

CNIC # _____

Mobile / Contract No _____

Permanent Address _____

Department / Institute _____

Class _____

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Sindh Bank 3734868282000

Mode of Payment Cash

Instrument

Instrument # _____

Authorized Signature

Depositor's Signature

**UNIVERSITY OF KARACHI
EXAMINATIONS DEPARTMENT**

SCRUTINY FORM

Name: _____

Father's Name: _____

Address: _____

Phone No: _____ Seat No: _____

Enrl./ Reg. No: _____ Class: _____

Email Address: _____

Name of Scrutiny Paper:

<i>Part-I</i>	<i>Part-II</i>

(Applicant Signature)

Required Documents:

01. Postal Envelope with Address
02. Photocopy of Mark Sheet.
03. Photocopy of Admit Card
04. Bank Voucher (N.B.P. / U.B.L. & M.C.B.)