HIMACHAL PRADESH UNIVERSITY

"LIBRARY SECURITY REFUND FORM"

Name of Department ___________________________ Sub ___________________________

Note-1. As per "Handbook of information refund of security may be withdrawn with in six months after the expiry date of academic session otherwise the same will be lapsed.

Note-2: Please write your bank account number on the space provided in form.

Bill No. __________ /HPU/Cash-2016-17. Dated: ____________

Name of the Student (in block letters) ____________________________________________

Father's Name (in block letters) _______________________________________________

Department __________________________ Class __________________________ Semester ___________

Class Roll No. __________________________ Session __________________________

Bank Account Number of student __________________________ (for the purpose of RTGS payment)

Address for Correspondence: ______________________________________________________

Security deposited vide University/SBI Receipt No. ______________________________________

Amount of Rs. ____________ Dated ____________ receipt verified Rs. ____________

Library Security fee ____________ fee verified Rs. ____________

** Seen by the Internal Audit Section **

D.A. Audit ____________ D.A. Department ____________ Signature of student ____________

Name ____________

***************************************************************************************

NOTHING IS DUE FROM THE STUDENT

Chairman ____________ Dean students welfare ____________ Chief Warden ____________ Librarian ____________

With Seal ____________ H.P. University ____________ H.P. University ____________ H.P. University ____________

***************************************************************************************

FOR USE OF THE CASH SECTION ONLY

Sanctioned/passed for payment of Rs. ____________ (Rupees ____________)

Only) Entry Library Security Refund Register Page No. ____________ and serial number ____________

D.A. (Cash) ____________ Section Officer (Cash) ____________ A.R/D.R (A/cs) ____________

***************************************************************************************

<table>
<thead>
<tr>
<th>Internal Audit Section, H.P. University, Shimla.</th>
<th>Cash Section, H.P. University, Shimla-5.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passed for payment of Rs. ____________/- (Rs. ____________)</td>
<td>Cheque No. ____________</td>
</tr>
<tr>
<td>Supdt S.O (IAO) A.R/D.R (Audit)</td>
<td>Dated: ____________</td>
</tr>
<tr>
<td>Supdt S.O (Cash) A.R (Accounts)</td>
<td></td>
</tr>
</tbody>
</table>