Draft #1 of File 2899/ACA1 SO/2020/AC A 1 Approved by ASSISTANT REGISTRAR I (ACADEMIC) on 18-Jan-2020 05:10 PM - Page 2

MAHATMA GANDHI UNIVERSITY, KOTTAYAM

FORMAT FOR ISSUING REFUND OF WRONG REMITTANCE OR EXCESS PAYMENT THROUGH e-PAY

Name of the candidate/ Institution	
Address	
Mobile No. & Email id	
Details of College, Course & Reg. No	

Details of Payment made through e-payment gateway

Chalan No	Amount	Date	Amount Requested as Refund

Reason for refund	
Name of A/c holder	
A/c No. to which refund is to be made	
IFSC code & Branch Name	

Remarks

Section :

Assistant Section Officer AR

Accounts Section III/IV

Assistant Section Officer DR

General Cash Section

Cheque No.- Amount (Rs) Cheque No.

Assistant Section Officer AR/DR/JR/FO

മഹാത്മാഗാന്ധി സർവ്വകലാശാല, കേരളം