

## LIBRARY PAYMENT SLIP

NAME:
STUDENT NO.:
DEPARTMENT/COLLEGE:

- ☐ OVERDUE BOOKS FINES
- ☐ PHOTOCOPYING
- ☐ PRINTING
- ☐ PROCESSING FEE OF LOST BOOK

AMOUNT: \_\_\_\_\_

ISSUED BY:

\_\_\_\_\_  
Signature Over Printed Name

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