



**DOCUMENTS TO BE ENCLOSED**

**Photocopy of HSC Marksheet**

**FEE SCHEDULE**

FORM FEE = Rs. 50/=

SCRUTINY FEE PER PAPER = Rs. 400/=

**IMPORTANT**

- (1) The Answer Script of candidate shall not be re-assessed as per rules.
- (2) Where the re-checking does not mean re-assessment or re-evaluation of the answer book.
- (3) Scrutiny result reply shall be sent to the address given by the student.

**Timings:** Monday to Friday 9:00 a.m. to 05:00 p.m. (Lunch & Prayer Break Monday to Thursday 1:00 to 2:00 p.m. & Friday 1:00 to 2:30 p.m.)

Forms can be downloaded from the website of BIE Karachi i.e. [www.biek.edu.pk](http://www.biek.edu.pk)  
For Complaints: [complaint@biek.edu.pk](mailto:complaint@biek.edu.pk)

SECTION BIEK COPY



**BOARD OF INTERMEDIATE EDUCATION,  
KARACHI** [F47]

**FEE VOUCHER FOR SCRUTINY**

**ANY BRANCH OF UBL A/C NO. 252536591**

طلبہ فیس جمع کروانے کے بعد فارم شیڈول کے مطابق جمع کروانے کے پابند ہوں گے  
تاریخ گزرنے کے بعد فارم قبول نہیں کیا جائے گا اور مذہبی فیس واپس کی جائے گی۔

DATE \_\_\_\_\_

NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

COLLEGE NAME/PRIVATE \_\_\_\_\_

C.N.I.C. No. \_\_\_\_\_

CONTACT # \_\_\_\_\_

H.S.C.ROLL NO. \_\_\_\_\_ YEAR \_\_\_\_\_

H.S.C. GROUP \_\_\_\_\_

ANNUAL  SUPPLEMENTARY

PURPOSE OF PAYMENT AMOUNT

**SCRUTINY FORM FEE** Rs. 50/=

**SCRUTINY FEE**  
(per subject Rs. 400/=) Rs.

TOTAL

(Rupees \_\_\_\_\_)

Depositor's Signature

Bank Officer's Signature

ACCOUNTS SECTION BIEK COPY



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DATE \_\_\_\_\_

NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

COLLEGE NAME/PRIVATE \_\_\_\_\_

C.N.I.C. No. \_\_\_\_\_

CONTACT # \_\_\_\_\_

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TOTAL

(Rupees \_\_\_\_\_)

Depositor's Signature

Bank Officer's Signature

BANK'S COPY



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DATE \_\_\_\_\_

NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

COLLEGE NAME/PRIVATE \_\_\_\_\_

C.N.I.C. No. \_\_\_\_\_

CONTACT # \_\_\_\_\_

H.S.C.ROLL NO. \_\_\_\_\_ YEAR \_\_\_\_\_

H.S.C. GROUP \_\_\_\_\_

ANNUAL  SUPPLEMENTARY

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**SCRUTINY FEE**  
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TOTAL

(Rupees \_\_\_\_\_)

Depositor's Signature

Bank Officer's Signature

DEPOSITOR'S COPY



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DATE \_\_\_\_\_

NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

COLLEGE NAME/PRIVATE \_\_\_\_\_

C.N.I.C. No. \_\_\_\_\_

CONTACT # \_\_\_\_\_

H.S.C.ROLL NO. \_\_\_\_\_ YEAR \_\_\_\_\_

H.S.C. GROUP \_\_\_\_\_

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