

**HBL HABIB BANK LTD**  
 HABIB BANK  
 حبيب بینک  
 CHATTER KULIYAN BRANCH (2275)  
 for credit to Cadet College  
 Muzaffarabad (AJ&K)  
 A/C # 22757100456901



CCM: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Issue \_\_\_\_\_ **Bank Copy**

Due Date \_\_\_\_\_

Particulars	Amount
Registration Fee	
Admission Fee	
Security Fee	
Tuition Fee	
Quarter Fee	
Fine	
Boarding Fee	
Total Dues	
After Due Date	
Deduction	
<b>Grand Total</b>	

Depositor's Contact No. \_\_\_\_\_

Cashier \_\_\_\_\_ Officer \_\_\_\_\_ Depositor's Signature \_\_\_\_\_

- Fee will be collected by Habib Bank Limited A/C # 22757100456901.
- Fee will be accepted without any fine upto 25th of first month of the quarter.
- Bank will charge fine of Rs. 20/- per day from 26<sup>th</sup> of the first month of the quarter till the day of deposit.

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Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Issue \_\_\_\_\_ **Accounts Copy**

Due Date \_\_\_\_\_

Particulars	Amount
Registration Fee	
Admission Fee	
Security Fee	
Tuition Fee	
Quarter Fee	
Fine	
Boarding Fee	
Total Dues	
After Due Date	
Deduction	
<b>Grand Total</b>	

Depositor's Contact No. \_\_\_\_\_

Cashier \_\_\_\_\_ Officer \_\_\_\_\_ Depositor's Signature \_\_\_\_\_

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Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Issue \_\_\_\_\_ **College Copy**

Due Date \_\_\_\_\_ From home Branch to collecting Branch

Particulars	Amount
Registration Fee	
Admission Fee	
Security Fee	
Tuition Fee	
Quarter Fee	
Fine	
Boarding Fee	
Total Dues	
After Due Date	
Deduction	
<b>Grand Total</b>	

Depositor's Contact No. \_\_\_\_\_

Cashier \_\_\_\_\_ Officer \_\_\_\_\_ Depositor's Signature \_\_\_\_\_

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CCM: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Issue \_\_\_\_\_ **Parents Copy**

Due Date \_\_\_\_\_

Particulars	Amount
Registration Fee	
Admission Fee	
Security Fee	
Tuition Fee	
Quarter Fee	
Fine	
Boarding Fee	
Total Dues	
After Due Date	
Deduction	
<b>Grand Total</b>	

Depositor's Contact No. \_\_\_\_\_

Cashier \_\_\_\_\_ Officer \_\_\_\_\_ Depositor's Signature \_\_\_\_\_

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