

University Dues



A/C No. 1672-79012993-52

(EVENING CLASSES)

May be Supplied with Admission Form.

HBL

Habib Bank
Farid Town Branch, Sahiwal

①

Chaitan No. _____ Date: _____

NAME IN BLOCK LETTERS

FATHER'S NAME:

FULL ADDRESS

Name of Class: _____

Class Roll No. _____ Session _____

	Rs.	Pk.
ADMISSION FEE		
TUITION FEE		
REGISTRATION FEE		
MIGRATION/ NOC. FEE		
ALL OTHER FEE (Pl. Specify Purpose also)		
Total Rs.		

Rupees (in Words) _____

Issued By: _____

MARK CHILLAN

OFFICER

CASHIER

University Dues



A/C No. 1672-79012993-52

(EVENING CLASSES)

To be Given to Depositor (For Record Only)

HBL

Habib Bank
Farid Town Branch, Sahiwal

②

Chaitan No. _____ Date: _____

NAME IN BLOCK LETTERS

FATHER'S NAME:

FULL ADDRESS

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Class Roll No. _____ Session _____

	Rs.	Pk.
ADMISSION FEE		
TUITION FEE		
REGISTRATION FEE		
MIGRATION/ NOC. FEE		
ALL OTHER FEE (Pl. Specify Purpose also)		
Total Rs.		

Rupees (in Words) _____

MARK CHILLAN

OFFICER

CASHIER

University Dues



A/C No. 1672-79012993-52

(EVENING CLASSES)

To be Retained by Bank

HBL

Habib Bank
Farid Town Branch, Sahiwal

③

Chaitan No. _____ Date: _____

NAME IN BLOCK

FATHER'S NAME:

FULL ADDRESS

Name of Class: _____

Class Roll No. _____ Session _____

	Rs.	Pk.
ADMISSION FEE		
TUITION FEE		
REGISTRATION FEE		
MIGRATION/ NOC. FEE		
ALL OTHER FEE (Pl. Specify Purpose also)		
Total Rs.		

Rupees (in Words) _____

MARK CHILLAN

OFFICER

CASHIER

University Dues



A/C No. 1672-79012993-52

(EVENING CLASSES)

To be Sent the Treasurer UOS Sahiwal

HBL

Habib Bank
Farid Town Branch, Sahiwal

④

Chaitan No. _____ Date: _____

NAME IN BLOCK LETTERS

FATHER'S NAME:

FULL ADDRESS

Name of Class: _____

Class Roll No. _____ Session _____

	Rs.	Pk.
ADMISSION FEE		
TUITION FEE		
REGISTRATION FEE		
MIGRATION/ NOC. FEE		
ALL OTHER FEE (Pl. Specify Purpose also)		
Total Rs.		

Rupees (in Words) _____

MARK CHILLAN

OFFICER

CASHIER