### Khyber Medical University Peshawar Fee Slip

**MCB Bank Limited** 





**Account No** 

### 0977029551007019 (BANK COPY)

STUDENTS FEE ONLY

| Student Name:                           |
|---|
|   |
| Father's Name:                          |
| Institute: Institute of Public Health 8 |
| Social Sciences (IPH&SS)-KMU            |
| Registration No:                        |
| Purpose of Deposit: <b>DHR</b>          |
|   |
| Semester/Year: One Year                 |
| Contact No                              |
| Email ID:                               |
|   |
| Amount Payable: <b>Rs. 139,180/-</b>    |
| In Words: One Hundred Thirty Nine       |
| Thousand and one Hundred Eighty Only    |
|   |
| Due Date:                               |
|   |
|   |

# Bank Authorized Signature with Stamp: Note:

- Can be deposited free online in any branch of MCB.
- All columns are required to be filled with legible handwriting.
- > All columns are mandatory

### Khyber Medical University Peshawar Fee Slip

**MCB Bank Limited** 



**Account No** 

# **0977029551007019** (KMU TREASURY COPY)

STUDENTS FEE ONLY

Student Name:

| Father's Name:  |
|---|
| Institute: Institute of Public Health &                         |
| Social Sciences (IPH&SS)-KMU                                    |
| Registration No:  |
| Purpose of Deposit: <u>DHR</u>                                  |
| Semester/Year: One Year   |
| Contact No  |
| Email ID:   |
| Amount Payable: Rs. 139,180/- In Words: One Hundred Thirty Nine |
| iii words. One Hundred Mility Nine                              |
| Thousand and one Hundred Eighty Only                            |
|   |

# Bank Authorized Signature with Stamp: Note:

- > Can be deposited free online in any branch of MCB.
- All columns are required to be filled with legible handwriting.
- All columns are mandatory

Due Date:

### Khyber Medical University Peshawar Fee Slip

MCB Bank Limited



Student Name:

kmı

**Account No** 

## 0977029551007019 (INSTITUTE COPY)

STUDENTS FEE ONLY

| Father's Name:                          |
|---|
| Institute: Institute of Public Health & |
| Social Sciences (IPH&SS)-KMU            |
| Registration No:                        |
| Purpose of Deposit: <b>DHR</b>          |
|   |
| Semester/Year: One Year                 |
| Contact No.                             |
| Email ID:                               |
|   |
| Amount Payable: <b>Rs. 139,180/</b> -   |
| In Words: One Hundred Thirty Nine       |
| Thousand and one Hundred Eighty Only    |

#### Due Date:

# **Bank Authorized Signature with Stamp: Note:**

- Can be deposited free online in any branch of MCB.
- All columns are required to be filled with legible handwriting.
- > All columns are mandatory

#### Khyber Medical University Peshawar Fee Slip

MCB Bank Limited



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

kmu

**Account No** 

### 0977029551007019 (STUDENT COPY)

STUDENTS FEE ONLY

| Father's Name:                        |
|---------------------------------------|
| Institute: Institute of Public Health |
| Social Sciences (IPH&SS)-KMU          |
| Registration No:                      |
| Purpose of Deposit: <u>DHR</u>        |
| Semester/Year: One Year               |
| Contact No                            |
| Email ID:                             |

Amount Payable: **Rs. 139,180/-**

In Words: One Hundred Thirty Nine
Thousand and one Hundred Eighty Only

Due Date:

# Bank Authorized Signature with Stamp: Note:

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- > All columns are mandatory