

NAME OF THE SCHOOL School address goes here City, State, Zip code Tel: 122-455-7788 | Fax: 444-555-6666 Email: example@email.com

STUDENT PAYMENT VOUCHER

STUDENT INFORMATION

Id: STU-3 | Name: ASDFSADFSA | Class: Nine | Section: C | Major: Comerce

PAYMENT INFORMATION

#SL	Payment Of	Payment Amount
1	Admission Form Fee	1
2	Admission Fee	2
3	Monthly Fee	3
4	Semester Fee	4
5	Yearly Fee	5
6	ID/Batch Fee	6
7	Uniform Fee	7
8	Scout Fee	8
9	Sports Fee	9
10	Penalty Fee	10
11	Picnic Fee	11
12	Study Tour Fee	12
13	Ceremony Fee	13
14	Transfer Fee	14
15	Exam Fee	15
16	Exam Center Fee	16
17	Board Fee	17
18	Character Certificate Fee	18
19	Transfer Certificate Fee	19
20	Transcripts Fee	20
21	Main Certificate Fee	21

Total Amount = 231.0 taka.

(MD. MIZAN) (ASDFSADFSA)

SCHOOL

PAY-2
NAME OF THE SCHOOL
School address goes here
City, State, Zip code

Tel: 122-455-7788 | Fax: 444-555-6666 Email: example@email.com

Student_Copy

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