

FEES RECEIPT**SHRIKRISHNA**
|| shrikrishna || **SHORTHAND INSTITUTE**

Near Navrang Health Club, Tophkhana, Ahmednagar

Phone: 0241-2324160, Mobile No: 9270513111

Email: jalindar.chaure111@gmail.com

Name of student : KAKADE NILESH RAVIANDRA (8263070834)**ReceiptNo: 2741****Reg No :** 539**Date:** 22/04/2025

Course	Ad. Date	Time	Classroom	Batch	Total	Paid	Disc.	Balance
MAR S/H-60	14/08/2024	07.00 AM	SHORT LAB 1	JUNE-2025	7100.00	600.00	0.00	6500.00

Received Amount ₹ 600.00 **By** Online Træ **Cheque No** phone pay **ChequeDate** 22/04/2025**Bank Name** _____**Amount in words** Rupees Six Hundred Only**Next Installment Date** 23/05/2025**Fees Collected By:** Office Copy**Authorised Stamp &Sign**

Note: Once paid Fees is registered with the name of student for his/ her selected subject at Exam Board so it is not refundable or transferable.

