|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Michael Thomas Group of Schools**  Institution address  *Email: $email Tel: $mobileNo* | | | | |
| **RECEIPT OF PAYMENT** | | | | |
|  |  | Receipt #: | | $receiptNumber |
| Received: | $amount | Date: | | $paymentDate |
| (in words): | $amountInWords | | | |
| From: | $payer | | |  |
| Narration: | $narration | | | |
| Mode of Payment: | $paymentMode | | Trans. #: | $chequeNumber |
| *Printed on September 4, 2013* | | | $userName  ------------------------------------------------  For: management | |
|  | | |  | |