#### Khyber Medical University Peshawar Fee Slip

**MCB Bank Limited** 



Student Name: \_\_\_



**Account No** 

### 0977029551007019 (BANK COPY)

STUDENTS FEE ONLY

Father's Name:
Institute: Institute of Public Health
Social Sciences (IPH&SS)-KMU
Registration No:
Purpose of Deposit: MHR Fall 2023
Semester/Year: 1st Semester Fee
Contact No
Email ID:
Amount Payable: Rs. 69,630/-
In Words: Sixty Nine Thousand Si
<b>Hundred and Thirty Only</b>
Due Date: 4 <sup>th</sup> September, 2023
Duc Date. + Jeptellibel, 2023

## 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 8	<u> </u>
Social Sciences (IPH&SS)-KMU	
Registration No:	
Purpose of Deposit: MHR Fall 2023	
Semester/Year: 1st Semester Fee	
Contact No.	
Email ID:	
Amount Payable: Rs. 69,630/-	
In Words: Sixty Nine Thousand Si	X
Hundred and Thirty Only	

### Due Date: 4<sup>th</sup> September, 2023

# 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

Student Name:

**MCB Bank Limited** 



**Account No** 

### 0977029551007019 (INSTITUTE COPY)

STUDENTS FEE ONLY

Father's Name:
Institute: Institute of Public Health 8
Social Sciences (IPH&SS)-KMU
Registration No:
Purpose of Deposit: MHR Fall 2023
Semester/Year: 1st Semester Fee
Contact No
Email ID:
Amount Payable: Ps. 69 620/

Amount Payable: **Rs. 69,630/-**

In Words: <u>Sixty Nine Thousand Six</u> Hundred and Thirty Only

Due Date: 4<sup>th h</sup> September, 2023

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- > All columns are mandatory

#### Khyber Medical University Peshawar Fee Slip

MCB Bank Limited



Student Name:

**š**kmi

Account No

### 0977029551007019 (STUDENT COPY)

STUDENTS FEE ONLY

Father's Name:
Institute: Institute of Public Health 8
Social Sciences (IPH&SS)-KMU
Registration No:
Purpose of Deposit: MHR Fall 2023
Semester/Year: 1st Semester Fee Contact No
Email ID:

Amount Payable: Rs. 69,630/In Words: Sixty Nine Thousand Six

**Hundred and Thirty Only** 

Due Date: 4<sup>th</sup> September, 2023

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