



# SWAT MEDICAL COLLEGE

## Fee Deposit Slip

Account No: 0010046311280034  
 Account Title Swat Medical Collage Private Limited  
 0362 - Saidu Sharif  
 (Bank Copy)

Date \_\_\_\_\_

### STUDENT'S DEPOSITS

Name. \_\_\_\_\_  
 Father's Name. \_\_\_\_\_  
 Registration No/Roll No. \_\_\_\_\_  
 Semester / Year. \_\_\_\_\_  
 Contact No. \_\_\_\_\_

Amount in Figure Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Customer Signature \_\_\_\_\_

Bank Authorized Signature with Stamp \_\_\_\_\_

Note:

1. Can be deposited free online in anybranch of ABL.
2. All Columns are mandatory

Disclaimer / ABL Disclaimer: "Cash/Cheque should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on deposit slip/chalan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed falling which the bank will not be responsible."



# SWAT MEDICAL COLLEGE

## Fee Deposit Slip

Account No: 0010046311280034  
 Account Title Swat Medical Collage Private Limited  
 0362 - Saidu Sharif  
 (Student Copy)

Date \_\_\_\_\_

### STUDENT'S DEPOSITS

Name. \_\_\_\_\_  
 Father's Name. \_\_\_\_\_  
 Registration No/Roll No. \_\_\_\_\_  
 Semester / Year. \_\_\_\_\_  
 Contact No. \_\_\_\_\_

Amount in Figure Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Customer Signature \_\_\_\_\_

Bank Authorized Signature with Stamp \_\_\_\_\_

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## Fee Deposit Slip

Account No: 0010046311280034  
 Account Title Swat Medical Collage Private Limited  
 0362 - Saidu Sharif  
 (Finance Copy)

Date \_\_\_\_\_

### STUDENT'S DEPOSITS

Name. \_\_\_\_\_  
 Father's Name. \_\_\_\_\_  
 Registration No/Roll No. \_\_\_\_\_  
 Semester / Year. \_\_\_\_\_  
 Contact No. \_\_\_\_\_

Amount in Figure Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Customer Signature \_\_\_\_\_

Bank Authorized Signature with Stamp \_\_\_\_\_

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# SWAT MEDICAL COLLEGE

## Fee Deposit Slip

Account No: 0010046311280034  
 Account Title Swat Medical Collage Private Limited  
 0362 - Saidu Sharif  
 (SAS Copy)

Date \_\_\_\_\_

### STUDENT'S DEPOSITS

Name. \_\_\_\_\_  
 Father's Name. \_\_\_\_\_  
 Registration No/Roll No. \_\_\_\_\_  
 Semester / Year. \_\_\_\_\_  
 Contact No. \_\_\_\_\_

Amount in Figure Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Customer Signature \_\_\_\_\_

Bank Authorized Signature with Stamp \_\_\_\_\_

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