

**MONEY RECEIPT**

DIRECTORY COLLEGE OF PHARMACY & ALLIED HEALTH SCIENCES
 DR. B. R. AMBEDKAR SAHA SARANI, SEWANGANJAL, CALCUTTA-74, WEST BENGAL
 Phone: 033-2512679 Fax: 033-2512678 Email: dircol@dircol.ac.in

Receipt No. **391/0012001** Date **07/01/2010**
 Student Name **CHARAN MUKHERJEE** Roll Number **1011005**
 Father's Name **SUBHASCHY MUKHERJEE** Semester **III**
 Mother's Name **SHEELI MUKHERJEE** Student Code **10101201000**
 Course Type **GENERAL** Bearing Category **HOSTELIER**
 Fees Category **GENERAL** Contact No **9732879070**
 Stream **B PHARM** University Ref
 Course **Pharmacy**
 Address **MADRAS POLICE LINE, QUARTER TYPE IV, P-1, PASCHIM MEDINIPUR, 721101**

FEES NAME	AMOUNT	DETAILS
EXAMINATION FEES OF MAJANT	200.00	10101201000
HOTEL MESS CHARGE	11500.00	10101201000
HOTEL SEAT RENT	7500.00	10101201000
LIBRARY FEES	750.00	10101201000
STUDENT WELFARE FUND	500.00	10101201000
TUTOR FEES	8100.00	10101201000
Total	79450.00	

In Words - Rupees - Seventy Thousand Four Hundred Fifty Only

Mode	Tran No	Date	Bank	Amount
DD	01703	27-12-2013	STATE BANK OF INDIA	79450.00

VALIDITY OF RECEIPT SUBJECT TO CLEARING OF CHEQUE DD

Rishabh Chaudhary

This is a system generated MR and does not require any signature