

Institution's Copy  
**ADITYA INST. OF PHARM. SCI. & RESEARCH**

The PAN No. of the Education Inst. : AAATA3099D

Name of Branch : \_\_\_\_\_

Date of Deposit : 

|   |   |   |   |   |   |
|---|---|---|---|---|---|
|   |   |   |   |   |   |
| D | D | M | M | Y | Y |

  
 (to be treated by student / Donor as fee receipt)

Account to be Credited : 0036SLFEECOL

1) Institution Name : FCAIP S

2) Student Name : \_\_\_\_\_

3) Roll No. / Regd. No. : 

|  |  |  |  |  |  |  |  |  |  |
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4) Year / Branch : 1 / 2 / 3 / 4

5) Course : B.Pharm / M.Pharm

6) Amount : Rs. \_\_\_\_\_

7) Amount in words : Rupees \_\_\_\_\_ Only

8) Cash Details :

| Denomination | Amount |
|--------------|--------|
| 1000 x       |        |
| 500 x        |        |
| 100 x        |        |
| 50 x         |        |
| 20 x         |        |
| 10 x         |        |
| 5 x          |        |
| Coins        |        |
| <b>Total</b> |        |

Cheque / Pay order / D.D.No. \_\_\_\_\_ Drawn on Bank \_\_\_\_\_

Payable at Branch \_\_\_\_\_

Signature/Stamp  
 ICICI Bank Ltd., Signature of Depositor

\* must be drawn payable at the centre of deposit of the instrument i.e. out station instruments not acceptable

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