

[Institute name]

FEE RECEIPT

Address: _____ Phone: _____

GSTIN (only if registered): _____

Student copy

Receipt no. _____ Date _____

Student name _____

Parent or guardian _____

Course or batch _____ Fee for (month or instalment) _____

Amount (₹) _____ Balance due (₹) _____

Amount in words _____

Paid by: ☐ Cash ☐ UPI ☐ Bank transfer ☐ Cheque

Transaction or cheque ref. _____

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Received by (signature and stamp)

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