



DR. B.R. AMBEDKAR INSTITUTE OF COMPUTER SCIENCES

(Run by Kalpana Early Sence Foundation)

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Attach
Photo
Here

PAYMENT CARD

Student : _____

Course : _____ **Admission Date** :/...../.....

Reg. No. : _____ **Batch** :

| Month | Stallment | Fees | Type of Payment | Receiver |
|-------------|-----------|------|-----------------|----------|
| January | | | | |
| February | | | | |
| March | | | | |
| Appril | | | | |
| May | | | | |
| Jun | | | | |
| July | | | | |
| August | | | | |
| September | | | | |
| October | | | | |
| November | | | | |
| December | | | | |
| Others Fees | | | | |

Remarks:

Authorised Signatory