AL MUJTABA EDUCATION TRUST (AMET)

VOUCHER – BENEFICIARY PAYMENT RECEIPT

DETA	AIL OF PARTICULAR		
1.	Name of Beneficiary and Class		
2.	Father's Name & CNIC		
3.	Postal Address		
4.	Details / Address of Institution		
DETA	AIL OF CHARGES		
	Details of Benefit	Amount (Attach Receipts of Payment)	Remarks
1.	Fee (All Categories)		
2.	Uniforms Charges		
3.	Books Charges		
4.	Transport Charges		
5.	Hostel Charges		
6.	Others		
	Total:-		
<u>SING</u>	NATURES		
	Detail	Name	Signatures
1.	Beneficiary/Parent/Guardian		
2.	Project Coordinator		
3.	Member ACC		
4.	Member ACC		
5.	Member ACC		

(Project Coordinator)