

PAYMENT RECEIPT

(APPLICATION FORM SUBMISSION CHARGES)

	Receipt No	2022177	Date	e	24-11-2022
Name	Md Afaque Ali		Institute	Modern paramedical institute	
Address	Garh par ,Bihar sharif Nalanda		City	Bihar sharif	
Phone	9206227955		E-Mail	mdafaqueali@gmail.com	

PAYMENT DETAILS

Trans. ID	Mode	Discount	Amount				
16282777117	NB	₹0.00	₹1100.00				
ONE THOUSAND ONE HUNDRED RUPEES ONLY							

1) Payment is Non Refundable.

2) If you have any query, call us at +91-9711136937.













www.ncetir.com +91-9711136937 info@ncetir.com



