BANK COPY

CADET COLLEGE SKARDU HABIB BANK LIMITED GAMBA BRANCH

ACCOUNT #: 16917900058403

Dated: _____/_____/2026

Name of Candidate: _____

Father's Name: _____

Fee: Registration Fee Class 8th (2027) Total Amount: Rs. 4000/- (Rupees Four Thousand only)

Depositor's Name: _____

Depositor's CNIC: _____

Depositor's Sig: _____

Cell #: _____

Received by: _____ **Date:** _____

Name: _____

Signature: _____

FOR BANK USE ONLY

Bank Receiver Signature and Stamp

Note:-

a. **Normal Fee upto 20 Oct 2026: Rs. 4000/-**
b. **After Due Date: Rs. 5000/-**

COLLEGE COPY

CADET COLLEGE SKARDU HABIB BANK LIMITED GAMBA BRANCH

ACCOUNT #: 16917900058403

Dated: _____/_____/2026

Name of Candidate: _____

Father's Name: _____

Fee: Registration Fee Class 8th (2027) Total Amount: Rs. 4000/- (Rupees Four Thousand only)

Depositor's Name: _____

Depositor's CNIC: _____

Depositor's Sig: _____

Cell #: _____

Received by: _____ **Date:** _____

Name: _____

Signature: _____

FOR BANK USE ONLY

Bank Receiver Signature and Stamp

Note:-

a. **Normal Fee upto 20 Oct 2026: Rs. 4000/-**
b. **After Due Date: Rs. 5000/-**

STUDENT COPY

CADET COLLEGE SKARDU HABIB BANK LIMITED GAMBA BRANCH

ACCOUNT #: 16917900058403

Dated: _____/_____/2026

Name of Candidate: _____

Father's Name: _____

Fee: Registration Fee Class 8th (2027) Total Amount: Rs. 4000/- (Rupees Four Thousand only)

Depositor's Name: _____

Depositor's CNIC: _____

Depositor's Sig: _____

Cell #: _____

Received by: _____ **Date:** _____

Name: _____

Signature: _____

FOR BANK USE ONLY

Bank Receiver Signature and Stamp

Note:-

a. **Normal Fee upto 20 Oct 2026: Rs. 4000/-**
b. **After Due Date: Rs. 5000/-**