

Government Ayurvedic College, Patiala

No Dues Slip

Name of the Student-----
Course (M.D (AY),
B.A.M.S; D-Pharmacy-----

Canteen -----

Sports -----

Library -----

Whether the Candidate
Is staying in the Hostel-----

If Yes, fill the table below:-

Sr no	Fee Details of the Hostel	Date of Allotment	Date of leaving the Hostel as per Hostel Superintendent's Register.	Signature Of Hostel Superintendent With seal

Fee Clerk -----

(As per demand &
Collection Register)

Bursar