
School Fee Payment Receipt

School Name: [Insert School Name]

Address: [Insert School Address]

Contact Number: [Insert School Contact Number]

Email: [Insert School Email Address]

Receipt No.:

[Insert Receipt Number]

Date:

[Insert Date]

Student Information:

Student Name: [Insert Student Name]

Class/Grade: [Insert Class or Grade]

Student ID: [Insert Student ID]

Payment Details:

Amount Paid: [Insert Total Amount Paid]

Payment Method: [Insert Payment Method (Cash, Credit Card, Bank Transfer, etc.)]

Fee for: [Insert Month, Term, or Year]

Transaction ID: [Insert Transaction ID (if applicable)]

Payment Date: [Insert Date of Payment]

Fee Breakdown:

Description	Amount
Tuition Fee	[Insert Amount]
Lab/Resource Fee	[Insert Amount]
Sports Fee	[Insert Amount]
Other Charges (if any)	[Insert Amount]
Total Amount:	[Total Amount]

Received By:

Name: [Insert Name]

Position: [Insert Position]

Signature: _____