

Universiti Tunku Abdul Rahman									
Form Title: UTAR ACKNOWLEDGEMENT OF PAYMENT									
Form Number: FM-DSA-015	Rev No: 1	Effective Date: 01/05/2011	Page No: 1 <b>of</b> 1						

Date :	/_		/				
Subject:	Paymen	t of _					
					, IC Number RM		
					during the _		
Name:			_				
Date:							
				RECIPI	ENT's COPY		
I,					, IC Number	, 1	nereby
declare	that	I			RM during the _		
held in _							
			_				
Name: Date:							
Date.							