

**BHILAI MAHILA MAHAVIDYALAYA**

Hospital Sector, Bhilai Nagar (E-6)
Tel: 0788 2242699, 2210078; Website: www.bhilaimahila.com
Email: bmahila@rediffmail.com

Student Name : KANIJ FATIMA

Receipt No. :

2020-21/A
11643/13Mother Name : K KASIM BEE
SHEKH

Receipt Date :

23-11-2020

Father Name : SHEKH RASOOL

Payment Mode :

CASH

Course/Class : B.SC (MATHS) 2
YEAR A

Cheq/Ch. No. :

Student Id : 1190191

Cheq/Ch. Date :

Admission No : 22

Balance Amount : 0.00

Remarks : sister concession

S. No.	Particulars	Amount
1	Establishment Fee	1850.00
2	Lab Fee	150.00

Total Amount(In Words) :

Total Amount :

5000.00

Five Thousand Rupees Only

Exemption Amount :

3000.00

Paying Amount :

2000.00

Authorised Signatory

**BHILAI MAHILA MAHAVIDYALAYA**

Hospital Sector, Bhilai Nagar (C. G.)
Tel: 0788 2242899, 2210079; Website: www.bhimahilal.com
Email: bmaife@vediffmail.com

Student Name : RITU BAHEL
Mother Name : LAKHVEER BAHEL
Father Name : KEVAL KRISHNA
BAHEL
Course/Class : B.COM.(CA) 2 YEAR
A
Student Id : 1190574
Admission No : 250
Remarks : sister concession-3000

Receipt No. : 2020-21/A
/3084/9
Receipt Date : 11-02-2021
Payment Mode : CASH
Cheq/Ch. No :
Cheq/Ch. Date :
Balance Amount : 0.00

S. No.	Particulars	Amount
1	Establishment Fee	3350.00
2	Lab Fee	650.00

Total Amount(In Words) :	Total Amount :	7000.00
Seven Thousand Rupees Only	Exemption Amount :	3000.00
	Paying Amount :	4000.00

Authorised Signatory

**BHILAI MAHILA MAHAVIDYALAYA**

Hospital Sector, Bhilai Nagar (C.G)
Tel: 0788 2242699, 2210078; Website: www.bmmbhilai.com
Email : bmahila@rediffmail.com

Student Name : KAMLENI
MAHANAND
Mother Name : USHA MAHANAND
Father Name : SURESH MAHANAND
Course/Class : B.SC.(COMP. SCIENCE)
3 YEAR A
Student Id : 1180373
Admission No : 52
Remarks : NSS CONCESSION-400

Receipt No. : 2020-21/A
/2659/44
Receipt Date : 25-01-2021
Payment Mode: CASH
Cheq/Ch. No :
Cheq/Ch. Date :
Balance Amount: 0.00

S. No.	Particulars	Amount
1	Alumni Fund	200.00
2	Establishment Fee	3950.00
3	Lab Fee	1450.00

Total Amount(In Words) :	Total Amount :	6000.00
	:	
Six Thousand Rupees Only	Exemption Amount :	400.00
	Paying Amount :	5600.00

Authorised Signatory

**BHILAI MAHILA MAHAVIDYALAYA**

Hospital Sector, Bhilai Nagar (C.G)
Tel: 0788 2242699, 2210078; Website: www.bmmbhilai.com
Email : bmahila@rediffmail.com

Student Name : SUNAINA KUJUR	Receipt No. : 2020-21/A /2606/28
Mother Name : NEEL KUSUM KUJUR	Receipt Date : 23-01-2021
Father Name : RUBEN KUJUR	Payment Mode : CASH
Course/Class : B.COM.(CA) 3 YEAR A	Cheq/Ch. No :
Student Id : 1180190	Cheq/Ch. Date :
Admission No : 29	Balance Amount : 0.00
Remarks : SPORTS CON.-1200	

S. No.	Particulars	Amount
1	Alumni Fund	200.00
2	Establishment Fee	3600.00

Total Amount(In Words) :	Total Amount :	5000.00
		:
Five Thousand Rupees Only	Exemption Amount :	1200.00
	Paying Amount :	3800.00

Authorised Signatory