

## PIR ABDUL QADIR SHAH JEELANI INSTITUTE OF MEDICAL SCIENCES, GAMBAT

## Challan Form For Application Processing Fee



BS BS

(4 years Degree Program)

MCB BANK LTD A/C# 0774672881000283 GIMS Branch (1725) FTN # 9030206-7

Dated:	
Dateu.	

Name:	
_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Program State of the State of t			
Father's	Nama.		
ratilers	Name: _		

District:	<b>MDCAT</b>	Roll#

S.No.	Details of Fee	Amount
1	Application Processing Fee	2000/- (Non refundable)
	TOTAL	2000/-

#### **INWORDS: TWO THOUSAND RUPEES ONLY**

Receiving Branch Stamp & Signature

Applicant's Signature

### College Copy



## PIR ABDUL QADIR SHAH JEELANI INSTITUTE OF MEDICAL SCIENCES, GAMBAT

### Challan Form For Application Processing Fee



BS

(4 years Degree Program)

MCB BANK LTD A/C# 0774672881000283 GIMS Branch (1725) FTN # 9030206-7

Dated:	
2 000000	

Name:	
_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Father's	Name	
rather 5	Maille.	

District:	MDCAT Roll#
-----------	-------------

S.No.	Details of Fee	Amount
1	Application Processing Fee	2000/- (Non refundable)
	TOTAL	2000/-

#### INWORDS: TWO THOUSAND RUPEES ONLY

Receiving Branch Stamp & Signature

Applicant's Signature

**Student Copy** 



# PIR ABDUL QADIR SHAH JEELANI INSTITUTE OF MEDICAL SCIENCES, GAMBAT

### Challan Form For Application Processing Fee

MCB

T BS

(4 years Degree Program)

MCB BANK LTD A/C# 0774672881000283 GIMS Branch (1725) FTN # 9030206-7

Datada		
Dated:	9	
Datu.		

Namas		
Name:		

1			
1	Father's Name		

District:	MDCAT Roll#	
District:	VIDCAI KOII#	

S.No.	Details of Fee		Amount
1	Application Processing Fee		2000/- (Non refundable)
		TOTAL	2000/-

#### INWORDS: TWO THOUSAND RUPEES ONLY

Receiving Branch Stamp & Signature

**Applicant's Signature**