

INVOICE

Cell : 9886680222

kamma Enterprises

LIG 46, Hudco Colony, **BIDAR** - 585401
email : kammaenterprises@gmail.com

No. **839**

Date : 10/3/22

Name S.B. Patil Dental College

Sl. No.	PARTICULARS	Qty.	Rate	Amount
17	Postallation			6000/-
27	Static IP one year			3500/-
37	50mbps			1200/-



₹. In Words Ten thousand

seven hundred only

CGST@ %

SGST@ %

G. TOTAL

10,700/-

SIGNATURE

Sonathappa
PRINCIPAL
 S.B. Patil Institute for
 Dental Science & Research
 VAUBAD, BIDAR-585402
 (Karnataka)

2810
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Yes

Hoststar

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BIDAR TELECOM DISTRICT

RECEIPT FOR PAYMENT OF BILLS/DEMAND NOTES

0281008

NAME	Principal, S.B. Patil Dental College & Hospital, Bidar		
RECEIPT NUMBER	DR1155330072100014	PAID ON	30-07-2021
TELEPHONE NUMBER	: 8482232680	AT	11553, Tdm Office (
BILL/D.N. DATE	:	ACCOUNT NUMBER	: 9027720704
Rs.	Inr(s) Twenty-Eight Thousand One Hundred Sixty-Six Only		28166/-
D.D./CHEQUE NUMBER	: 048909 / 30-07-2021	AMOUNT	:
BANK	Default	MODE OF PAYMENT	CHEQUE
DATE	CDR	USER	b00102265
PAYMENT CODE		USER	:

S. B. Patil
PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)

OFFICE OF THE TELECOM DISTRICT MANAGER, BIDAR-585 401.

To, THE PRINCIPAL SB PATIL INSTITUTE FOR DENTAL SCIENCE & RESEARCH HUMNABAD RAOD, NAUBAD BIDAR -585327		ANNUALLY PLAN FOR FTTH BB Rs.1999/ CONNECTION	
ADVANCE BILL PAYMENT		TEL No.	BILLING A/C
			9027720704
DEMAND NOTE NO. P-08481-/BDR/2021-21		THE PARTICULARS OF ARE GIVEN BELOW.	
DATE: 30-07-2021			
The three copies along with Cash / Bank Draft should be presented at Division Cash counter, for outside Divisional H.O. it may be presented at the local Post Office.		Details of Charge	RS.
			PS
		1) Advance annual rental charges with 1999/- ftth BB Plan	20,990
		2) statstic ip charges ONT RENT p/a	1,800 1,080
PAYABLE ON OR BEFORE	Payment Not to Be Accepted AFTER	FTTH Plan Deposit	0
DATE: 07-08-2021		CGST & SGST 18% ONT RENT p/a	4,296
		TOTAL RS.	28166
		Grand Total	0
ISSUING OFFICER		(Rupees, TWENTY EIGHT Thousand ONE hundred SIXTY SIX only)	

for Venu 30/7/2021
वाणिज्य अधिकारी
COMMERCIAL OFFICER
दू.जि.प्र.का.बीदर/0/0. TDM BIDAR-585401
225600(P), 232601(R)

Amrath
PRINGIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)



SOMANATHI EDUCATIONAL TRUST'S
S. B. PATIL INSTITUTE FOR DENTAL SCIENCES & RESEARCH
BIDAR - 585 402 (KARNATAKA)

(Affiliated to Rajarajeshwari University of Health Sciences & Recognized by Dental Council of India)
 Email: principal@sbpdch@yahoo.co.in www.sbpatilcollege.com
 Ph: 08482 232101-232588 Fax: 08482-232101

Estd. 1991

C: SPT/SBPIDSR/BDR/2021-22

Date 30/7/2021

To,
 TDM,
 BSNL,
 BIDAR.

Sub: Providing the facility of Fiber internet
 on 232680 with 1999 Annual plan Reg-

Respected, Sir,

With Ref. to above, I would like to bring your
 kind notice, in regard with the facility of
 Providing FIBER INTERNET, connection
 to the Existing connection on 232680.

Thanking you.

Encl. cheque & Application form.

To,
 SDE (comd)
 for n/a please.
 [Signature] / 30/07/2021

[Signature]
PRINCIPAL
 S.B. Patil Institute for
 Dental Science & Research
 NAUBAD, BIDAR-585402
 (Karnataka)

[Signature]
PRINCIPAL
 S.B. Patil Institute for
 Dental Science & Research
 NAUBAD, BIDAR-585402
 (Karnataka)

BHARAT SANCHAR NIGAM LIMITED
 (www.bsnl.co.in)
FORM FOR FIBER BASED SERVICES NEW CONNECTION

APPROPRIATE BOX TO BE CHECKED
 (PLEASE TICK THE APPROPRIATE BOXES)
 WHETHER EXISTING CUSTOMER OF BSNL

Companies/Organizations _____ Individuals _____

(Tick appropriate box) (Please tick the appropriate box while filling the form)

Whether Existing Customer of BSNL _____

A. Title Name of the Customer (SURNAMALY FIRST)
 Company / Firm / Organization PRINCIPAL S. B. PATIL INSTITUTE FOR DENTAL SCIENCES
 B. Name of the Joint Applicant (if any) AND RESEARCH BIDAR

Name of Father / Husband _____
 Grand / Proprietor / Partners _____
 Movable Assets _____
 Computer No. / Serial No. / Home 252101 Business No. 9448452488
 Complete Address (where service will be provided) _____
 House No. _____ Street / Road / Village Hummabad Road.

Block / Apt. S.B. Patil Dental College Area / Locality / Tehsil Narbad
 City / District BIDAR PIN 585402 State Karnataka

Billing / Correspondence Address (if different) _____
 House No. _____ Street / Road / Village Narbad
 Block / Apt. _____ Area / Locality / Tehsil _____
 City / District Bidar PIN 585402

E-mail address (if any) principalspbpcch@yahoo.co.in
 Gender Male Female

Whether the applicant is a retired or working Employee of Govt. PSU / CPSU _____

2. Purpose Residence Business
 3. Service Type - Broadband IPTV / CABLE TV
 4. Number of Connections Required - Broadband IPTV

5a. Facilities Required on Telephones (tick whichever is required) (please affix photograph for ISD facility)
 STD ISD CLI Hotline Conferencing Call Forwarding Hunting

15b. Facilities Required on Video (tick whichever is required) (please affix photograph for ISD facility)
 Video conferencing Video Calls Others

16. Whether Telephone instrument is required Yes No

17. Whether STB's required Yes No

18. Type of ONT Type-A Type-B

19a. Mention the tariff package required for _____
 (Please see various tariff packages available) FIBER SILVER

19b. Bill frequency Monthly Yearly Five Yearly

19c. Bundled Service Packages _____
 20. Payment Mode: Cash / Demand Draft _____ Amount _____
 Payment Details: DD No / ch. no. 248909 Dated _____
 Drawn On: Bank Bank of Maharashtra Branch Bidar

PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NARBAD, BIDAR, KARNATAKA

I hereby declare that information given above is true to the best of my knowledge and I will abide by the prevailing Telecom Act / Rules framed there under & Law as amended from time to time. I am not a defaulter on account of non-payment of bills for any telecom services provided by any service provider. In the event of any dispute concerning any telecom line, apparatus or appliance, bill etc. between me/us and BSNL, the matter will be referred to the sole arbitrator appointed by BSNL and authority in BSNL and shall be governed by the provisions of the Arbitration and Conciliation Act, 1996.

Signature of Customer / Authorized Signatory
 Signed on Date _____

Signature of Customer / Authorized Signatory
PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NARBAD, BIDAR, KARNATAKA
 (Stamp)

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BIDAR TELECOM DISTRICT

RECEIPT FOR PAYMENT OF BILLS/DEMAND NOTES

Principal, S.B. Patil Dental College & Hospital, Naubad
 BDR1155721061800001 0296386
 RECEIPT NUMBER : 21-06-2018 . AT 11557, Tdm Office Cash
 TELEPHONE NUMBER : 8482232104 PAID ON : AT
 BILL/D.N. DATE : ACCOUNT NUMBER : 9027708975
 Rs. Inr(s) Ten Thousand Only AMOUNT : 10000/-
 D.D./CHEQUE NUMBER/DATE : 430510 / 21-06-2018
 BANK: Syndicate Bank
 PAYMENT CODE CDR MODE OF PAYMENT CHEQUE USER: b198806438

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BIDAR TELECOM DISTRICT

RECEIPT FOR PAYMENT OF BILLS/DEMAND NOTES

Principal, S.B. Patil Dental College & Hospital, Bidar
 BDR1155721061800002 0296387
 NAME : 21-06-2018 . AT 11557, Tdm Office Cash
 RECEIPT NUMBER : 8482232680 PAID ON : AT
 TELEPHONE NUMBER : ACCOUNT NUMBER : 9027720704
 BILL/D.N. DATE : AMOUNT : 10000/-
 Rs. Inr(s) Ten Thousand Only
 D.D./CHEQUE NUMBER/DATE : 430510 / 21-06-2018
 BANK: Syndicate Bank
 PAYMENT CODE CDR MODE OF PAYMENT CHEQUE USER: b198806438

S. B. Patil
PRINCIPAL
 S.B. Patil Institute for
 Dental Science & Research
 NAUBAD, BIDAR-585402
 (Karnataka)



भारत संचार निगम लिमिटेड
(भारत सरकार का उपनिगम)
BHARAT SANCHAR NIGAM LIMITED
(A Govt. of India Enterprise)

245
29-5-18
Ay

OFFICE OF THE TELECOM DISTRICT MANAGER, BIDAR-585 401.

TO, THE PRINCIPAL, S.B. PATIL DENTAL COLLEGE & HOSPITAL, NAUBAD,
BIDAR-585402.

SMBPS VPNoBB CONNECTION UNDER NMEICT
PROJECT

BILL PAYMENT

Telephone No. Billing Account No.

08482-232680

9027720704

NO. P-08483232680/BDR/2017-18/
DATE: 26-05-2018

THE PARTICULARS OF ADVANCE BILL ARE GIVEN BELOW.

This Demand Note in 3 copies along with Cash / Bank Draft
should be presented at Division Cash counter, for outside
Divisional H.O. it may be presented at the local Post Office.

Details of Charge	RS.	PS
2017-18 Rental charges for VPNoBB of BW 5Mbps connectivity under NMEICT Project.	10000	0
TOTAL RS.	10000	0

PAY ABLE
ON OR
BEFORE

Payment Not to Be Accepted AFTER

DATE: 09-06-2018


ISSUING OFFICER

(Rupees, Ten Thousand only.)

उप मंडल अभियंता (वाणिज्य)


Sub Divisional Engineer (Comt)

दू.जि.प्र.का.बीदर/0.0. TDM BIDAR-585401

225600(P), 232601(R)


CSuresh

Forwarded to Account Section
to do the needful
31/5/18


PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)





11/12/18
6:00

Receipt for Payment of Bills/Demand notes. This Receipt is generated from BSNL Portal.

Receipt No	881812145248893
Transaction ID	FCDR1412187442367
Transaction Date	14-12-2018 13:18:49
Amount	₹ 9911.00
Phone No	8482232104
Account No	9027708975
Bank Reference No	5523300
Invoice No	SDCKA0012567506

Handwritten signature



S. B. Patil
PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)



642

Receipt for Payment of Bills/Demand notes. This Receipt is generated from BSNL Portal.

Receipt No	881812145248760
Transaction ID	FCDR1412187442177
Transaction Date	14-12-2018 13:16:39
Amount	₹ 9913.00
Phone No	8482232680
Account No	9027720704
Bank Reference No	5443300
Invoice No	SDCKA0012567077

Handwritten signature

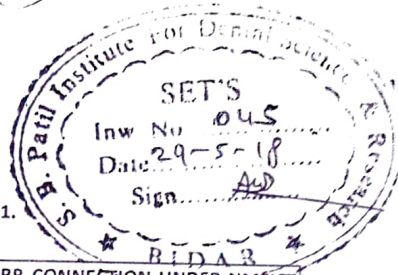


Handwritten signature
PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)

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BHARAT SANCHAR NIGAM LIMITED
(A Govt. of India Enterprise)



OFFICE OF THE TELECOM DISTRICT MANAGER, BIDAR-585 401.

O, THE PRINCIPAL, S.B. PATIL DENTAL COLLEGE & HOSPITAL, NAUBAD, BIDAR-585402.

5MBPS VPNoBB CONNECTION UNDER NMEICT PROJECT

BILL PAYMENT

Telephone No. 08482-232104
Billing Account No. 9027708975

NO. P-08483232104/BDR/2017-18/

THE PARTICULARS OF ADVANCE BILL ARE GIVEN BELOW.

DATE: 26-05-2018

This Demand Note in 3 copies along with Cash / Bank Draft should be presented at Division Cash counter, for outside Divisional H.O. it may be presented at the local Post Office.

Details of Charge	RS.	PS
2017-18 Rental charges for VPNoBB of BW 5Mbps connectivity under NMEICT Project.	10000	0
TOTAL RS.	10000	0

PAY ABLE ON OR BEFORE
Payment Not to Be Accepted AFTER

DATE: 09-06-2018

Patil

ISSUING OFFICER

उप मंडल अभियंता (वाणिज्य)

(Rupees, Ten Thousand only.)

Sub Divisional Engineer(Comt)

दू.जि.प्र.का.बीदर/0/0 TDM BIDAR-585401
225600(P), 232601(R)

CSURAS

Forwarded to Account section to do the needful
DWS
31/5/18

S. B. Patil
PRINCIPAL
S.B. Patil Institute for
Dental Science & Research
NAUBAD, BIDAR-585402
(Karnataka)

