

BANK COPY



# Dow University of Health Sciences

CUSTOMER CODE : DUAPF  
MEEZAN BANK LTD.

Due Date: 21/07/2023

NICOP \ N.I.C: #

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FINANCE COPY



# Dow University of Health Sciences

CUSTOMER CODE : DUAPF  
MEEZAN BANK LTD.

Due Date: 21/07/2023

NICOP \ N.I.C: #

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INSTITUTE COPY



# Dow University of Health Sciences

CUSTOMER CODE : DUAPF  
MEEZAN BANK LTD.

Due Date: 21/07/2023

NICOP \ N.I.C: #

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STUDENT'S COPY



# Dow University of Health Sciences

CUSTOMER CODE : DUAPF  
MEEZAN BANK LTD.

Due Date: 21/07/2023

NICOP \ N.I.C: #

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Name	_____
Father's Name	_____
Course	PhD & MPhil
Detail of Fees	Amount
Application Processing Fee	5000.00
<b>TOTAL</b>	<b>Rs.5000.00</b>
RUPEES FIVE THOUSAND ONLY	
_____	_____
Receiving Branch Stamp & Signature	Student Signature

Name	_____
Father's Name	_____
Course	PhD & MPhil
Detail of Fees	Amount
Application Processing Fee	5000.00
<b>TOTAL</b>	<b>Rs.5000.00</b>
RUPEES FIVE THOUSAND ONLY	
_____	_____
Receiving Branch Stamp & Signature	Student Signature

Name	_____
Father's Name	_____
Course	PhD & MPhil
Detail of Fees	Amount
Application Processing Fee	5000.00
<b>TOTAL</b>	<b>Rs.5000.00</b>
RUPEES FIVE THOUSAND ONLY	
_____	_____
Receiving Branch Stamp & Signature	Student Signature

Name	_____
Father's Name	_____
Course	PhD & MPhil
Detail of Fees	Amount
Application Processing Fee	5000.00
<b>TOTAL</b>	<b>Rs.5000.00</b>
RUPEES FIVE THOUSAND ONLY	
_____	_____
Receiving Branch Stamp & Signature	Student Signature

Note: \* Payment is Non-refundable.  
\* No payment shall be accepted after the Due Date.

\* Fee submission related issues may be enquired at [cms.fee@duhs.edu.pk](mailto:cms.fee@duhs.edu.pk).