

# Dow Universityof Health Sciences

UBL A/C# 2 4 3 8 3 3 8 0 9

Due Date:	15/0	96/2	<i>022</i>
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N.I.C: #												

Name	·	
T-411-		

Father's	
Name	

Course	MPhil
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Detail of Fees	Amount
Application Processing Fee	5000.00
TOTAL	Rs.5000.00
RUPEES FIVE THOUSAND	ONLY

### Pay order No./Cash Bank Name

Receiving Branch Student Signature Stamp & Signature

Note: "No payment will be received after the expiry of the due date"

#### **FINANCE COPY**



# Dow Universityof Health Sciences

UBL A/C# 2 4 3 8 3 3 8 0 9

### Due Date: <u>15/06/2022</u> **N.I.C:** #

Name						
Father's						
Name						
Course	М	Phi	ı			

Detail of Fees	Amount					
Application Processing Fee	5000.00					
TOTAL	Rs.5000.00					
RUPEES FIVE THOUSAND ONLY						

Pay order No./Cash Bank Name

# Receiving Branch Student Signature Stamp & Signature

Note: "No payment will be received after the expiry of the due date"

#### INSTITUTE COPY



N T C. 4

# Dow Universityof Health Sciences

UBLA/C# 2 4 3 8 3 3 8 0 9

### Due Date: <u>15/06/2022</u>

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Detail of Fees	Amount
Application Processing Fee	5000.00
TOTAL	Rs.5000.00
RUPEES FIVE THOUSAND	ONLY

Pay order No./Cash Bank Name

Receiving Branch
Student Signature
Stamp & Signature

Note: "No payment will be received after the expiry of the due date"

## STUDENT'S COPY



**N.I.C:** #

# Dow Universityof Health Sciences

UBLA/C# 2 4 3 8 3 3 8 0 9

### Due Date: <u>15/06/2022</u>

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F	ath	er	's						

Fatner's		
Name		
Course	MPhil	

Detail of Fees	Amount
Application Processing Fee	5000.00
TOTAL	Rs.5000.00
RUPEES FIVE THOUSAND ONLY	

Pay order No./Cash Bank Name

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