





Challan Form For Application Processing Fee

Collecting Branch Copy	DUHS A/c Office Copy	Application Form Copy	Applicant's Copy																																
<div><p>FEE VOUCHER FOR POSTGRADUATE PROGRAM SCHOOL OF POSTGRADUATE STUDIES FCPS-II Jan-2021 (Session-2021-A) <u>Dow University of Health Sciences</u> DMC CAMPUS UBL A/C # 101-3400-6 Baba-e-Urdu Road Branch, Karachi- 0401</p><p>Due Date: <u>13Nov/2020</u></p><p>Name _____</p><p>Father's Name _____</p><table><thead><tr><th>Detail of Fees</th><th>Amount</th></tr></thead><tbody><tr><td>Application Processing Fee</td><td>5,000.00</td></tr><tr><td>TOTAL</td><td>Rs.5,000.00</td></tr><tr><td colspan="2">RUPEES FIVE THOUSAND ONLY</td></tr></tbody></table><p>Note: The fee amount should be deposited with the application form at authorized UBL branches.</p><p>_____ Receiving Branch Stamp & Signature</p><p>_____ Applicant Signature</p></div>	Detail of Fees	Amount	Application Processing Fee	5,000.00	TOTAL	Rs.5,000.00	RUPEES FIVE THOUSAND ONLY		<div><p>FEE VOUCHER FOR POSTGRADUATE PROGRAM SCHOOL OF POSTGRADUATE STUDIES FCPS-II Jan-2021 (Session-2021-A) <u>Dow University of Health Sciences</u> DMC CAMPUS UBL A/C # 101-3400-6 Baba-e-Urdu Road Branch, Karachi- 0401</p><p>Due Date: <u>13Nov/2020</u></p><p>Name _____</p><p>Father's Name _____</p><table><thead><tr><th>Detail of Fees</th><th>Amount</th></tr></thead><tbody><tr><td>Application Processing Fee</td><td>5,000.00</td></tr><tr><td>TOTAL</td><td>Rs.5,000.00</td></tr><tr><td colspan="2">RUPEES FIVE THOUSAND ONLY</td></tr></tbody></table><p>Note: The fee amount should be deposited with the application form at authorized UBL branches.</p><p>_____ Receiving Branch Stamp & Signature</p><p>_____ Applicant Signature</p></div>	Detail of Fees	Amount	Application Processing Fee	5,000.00	TOTAL	Rs.5,000.00	RUPEES FIVE THOUSAND ONLY		<div><p>FEE VOUCHER FOR POSTGRADUATE PROGRAM SCHOOL OF POSTGRADUATE STUDIES FCPS-II Jan-2021 (Session-2021-A) <u>Dow University of Health Sciences</u> DMC CAMPUS UBL A/C # 101-3400-6 Baba-e-Urdu Road Branch, Karachi- 0401</p><p>Due Date: <u>13Nov/2020</u></p><p>Name _____</p><p>Father's Name _____</p><table><thead><tr><th>Detail of Fees</th><th>Amount</th></tr></thead><tbody><tr><td>Application Processing Fee</td><td>5,000.00</td></tr><tr><td>TOTAL</td><td>Rs.5,000.00</td></tr><tr><td colspan="2">RUPEES FIVE THOUSAND ONLY</td></tr></tbody></table><p>Note: The fee amount should be deposited with the application form at authorized UBL branches.</p><p>_____ Receiving Branch Stamp & Signature</p><p>_____ Applicant Signature</p></div>	Detail of Fees	Amount	Application Processing Fee	5,000.00	TOTAL	Rs.5,000.00	RUPEES FIVE THOUSAND ONLY		<div><p>FEE VOUCHER FOR POSTGRADUATE PROGRAM SCHOOL OF POSTGRADUATE STUDIES FCPS-II Jan-2021 (Session-2021-A) <u>Dow University of Health Sciences</u> DMC CAMPUS UBL A/C # 101-3400-6 Baba-e-Urdu Road Branch, Karachi- 0401</p><p>Due Date: <u>13Nov/2020</u></p><p>Name _____</p><p>Father's Name _____</p><table><thead><tr><th>Detail of Fees</th><th>Amount</th></tr></thead><tbody><tr><td>Application Processing Fee</td><td>5,000.00</td></tr><tr><td>TOTAL</td><td>Rs. 5,000/=</td></tr><tr><td colspan="2">RUPEES FIVE THOUSAND ONLY</td></tr></tbody></table><p>Note: The fee amount should be deposited with the application form at authorized UBL branches.</p><p>_____ Receiving Branch Stamp & Signature</p><p>_____ Applicant Signature</p></div>	Detail of Fees	Amount	Application Processing Fee	5,000.00	TOTAL	Rs. 5,000/=	RUPEES FIVE THOUSAND ONLY	
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