

(This is original copy for payee.) 2023 - 2024

S5047



Academic Year : 2023 - 2024

**Maharashtra University of Health Sciences**  
Original Copy

**Receipt No** : 1543446/2324 **Date** : Wednesday, 25 October, 2023  
**Under Section** : [5047] University Department Cell  
**Received From** : Patankar Hospital Pvt Ltd  
**Narration** : CRF-Continuation/Renewal Fee For Fellowship Course ( For 1 Course)  
**Email Address** : info@patankarhospital.com **Mobile No.** : 9552587356

On Account Of	Amount [Rs]
1. 4161 ER10501 Fellowship /Certificate Program Continuation Of Affiliation Fees	50,000.00
2. 4162 ER10502 Fellowship/ Certificate Program Application Fees	0.00
3. 4163 ER10503 Fellowship/certificate Program Syllabus Fees	0.00

**Subject To Relisation Receipt Total** **50,000.00**

**Rupees (in words)** : Fifty Thousand Rupees Only.

**Payment Details : 1 NEFT**

1. 25.10.23 50,000.00 By NEFT 18370465061, ORC for request no  
FSTKN0003965949044

College : 102176 -Patankar Hospital Pvt Ltd, Pune, Pin-411002

Receipt Type: StudentFees

Receiver : Online Receipt Counter

Registrar MUHS, Nashik

Wednesday, 25 October, 2023 05:45 pm [AD: -1, UniSuite ORC, ORC, -1]

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(This copy is to submit to respective section for which payee paid/paying this.) 2023 - 2024

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