



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

वणी रोड, म्हसळ, नाशिक-४२२००४

Vani Road, Mhasrul, Nashik-422004

Phone: 0253-2539190-94 / EPABX: 0253-2539100 - 300 / Fax: 0253-2539195

E-mail: academic@muhsnashik.com / Web: www.muhsnashik.com

Ph. No.: 0253-2539198

A. K. Sonawane
Asst. Registrar

No. MUHS/E-6/6401001/3876 /10

Date: 14/12/2010

To,
The Principal
Maharashtra Institute of Physiotherapy,
College of Physiotherapy,
MIMSR Medical College & YCR Hospital Campus,
Vishwanathpuram,
Ambajogai Road, Latur - 413 531

Sub :- Forwarding of Receipt..

Ref. :- Your letter No. MIP/Affili/514/345/2010 dtd. 29/10/2010

Sir/Madam,

Please find enclosed herewith the below mentioned receipt for the fee submitted by you towards Continuation of affiliation for A.Y. 2011-12.

Sr. No.	Type of fee and year	Amount	D.D. No. and date	Receipt No. and date
1	Continuation of affiliation for Physiotherapy course for A.Y. 2011-12	25,000/-	281716-29/10/2010	94840-11/11/10
		25,000/-	281717-29/10/2010	

Thanking You,

Yours faithfully,

Asst. Registrar
Academic Section

MIP College of Physiotherapy, Latur
Co-Ordinator _____
Principal _____
A. O. _____
Section MIP/Affili/514/2010
Inward No. 554/28/12/2010