



Rashtriya Aarogya Nyaya Sanshodhan Sanstha
NOOTAN HOMOEOPATHIC MEDICAL COLLEGE AND HOSPITAL
(Recognized By CCH, New Delhi & Affiliated to MUHS, NASHIK)
Narsinghaon (Landgewadi), Kavathemahankal Dist- Sangli.



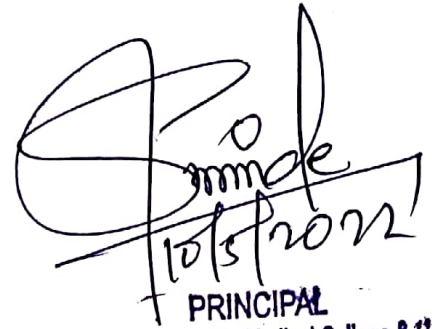
Ph : 02341 222738

Email- nootanhch@gmail.com

Date: 10/05/2022

Continuation /Extention of Affiliation Fee Details

Sr.No.	Course	Paid / Not Paid	Amount	Outstanding of any	Reason for non payment
1	BHMS	Paid Receipt is Uploaded	4,00,000/-	Nil	Nil



PRINCIPAL
Nootan Homoeopathic Medical College & Hospital
Narsinghaon, Kavathe Mahankal
Dist:- Sangli. 416419, Maharashtra



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Ph : 02341 222738

Website : www.nootanhmch.com

Email- nootanhch@gmail.com

Ref: NHMC&H / 872 / 2021

Date: 20 / 10 / 2021

To,
The Registrar,
Maharashtra University of Health Sciences,
Nashik.

Sub – Regarding submission of Proposal for Continuation & Extension of Affiliation for
A.Y 2022-23

Respected Sir,

With reference to above subject, we are submitting the proposal for Continuation & Extension of Affiliation for A.Y 2022-23, The Affiliation fee of Rs 4,00,000/- (Four Lakhs only) is deposited in your account on 14/10/2021 by RTGS & account transfer with UTR NO BKID21287146704 & Cheque no 000030. The receipt is enclosed along with proposal.

This is for your information & necessary action

Thanking you,

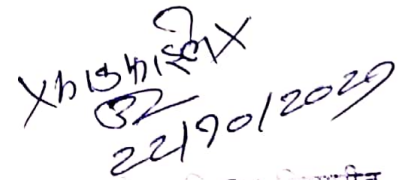
Yours faithfully


PRINCIPAL 20/10/2021

Nootan Homoeopathic Medical College & Hospital
Narsinngaon, Kavathe Mahankal
Dist- Sangli. 416419, Maharashtra

Enclosed –

1. Proposal for Affiliation page no 01 to 09
2. RTGS Receipt
3. National Commission for Homoeopathy permission letter.


22/10/2021

महाराष्ट्र विद्यापीठ
म्हसळ, वजी-दिंडोरी रोड, नाशिक - 422 008

बैंक ऑफ़ इंडिया
Bank of India

BOI



राष्ट्रीय इलेक्ट्रॉनिक निधी अंतरण/
तत्काल सकल निपटान प्रणाली
(एनईएफटी / आरटीजीएस)

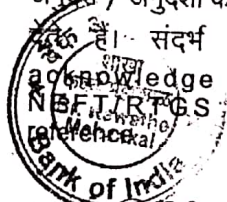
APPLICATION FOR NATIONAL ELECTRONIC
FUND TRANSFER / REAL - TIME GROSS
SETTLEMENT SYSTEMS (NEFT/RTGS)

ग्राहक की पावती
CUSTOMER
ACKNOWLEDGMENT

दिनांक / Date : 14/10/2024

हम एनईएफटी/आरटीजीएस
अनुदेश / अनुदेशों की प्राप्ति की पावती

संदर्भ संख्या / We
acknowledge receipt of
NEFT/RTGS instructor



No. : 20010001-

शाखा / Branch K. Mahankal

बैंक के अधिकारी का नाम एवं हस्ताक्षर/
Name and Signature of Bank Officer

28746704

निवेदन की तारीख और समय
के साथ बैंक की मुहर
Bank Date & Time of Request

PRINCIPAL

Noolan Homoeopathic Medical College & Hospital
Narsinhaon, Kavathe Mahankal
Dist:- Sangli. 416419, Maharashtra

FEES PAID TO MVHS OF
CONTINUATION & EXTENSION OF
APPELLATION FOR A.Y. 2022-23.
on 14/10/2021

Deposit Slip / जमा पत्री / देपॉजिट
(Customer Copy / ग्राहक प्रति / ग्राहकी प्रत)

HDFC BANK
understand your world

Date / तारीख / तिथि: 14/10/2021

Account Number / खाता संख्या / खाते क्रमांक: 00641450000649

Credit Card Number / क्रेडिट कार्ड संख्या / क्रेडिट कार्ड क्रमांक: [Blank]

Name / नाम / नाव: Registrar Maharashtra University of Health Sciences

Cash/Cheque Details / लेकड / चेकों का विवरण / रुपये / वनादेशाद्य तपशील	Cheque No. / चेक नं. / वनादेश क्रमांक	Rupees / रुपये / रूपये
HDFC Kavathe Mahankal	000000	200000
Total Rs. / कुल राशि / एकूण रक्कम		200000

Rupees (In Words):
रुपये (शब्दों में): Two Lakh Rupees only
रुपये (अक्षरी):

Anshu

Registrar's Signature / ग्राहकों के हस्ताक्षर / जमा करनेवाली पत्री
Teller's Signature / देपॉजिट के हस्ताक्षर / लेखक

Anshu
4/10/2021
PRINCIPAL
Nootan Homoeopathic Medical College & Hospital
Narsinhaon, Kavathe Mahankal
Dist:- Sangli. 416419, Maharashtra