Medical Superintendent,

THQ hospital, Ahmadpur East. Subject: - _____ Respected Sir, It is being stated_____ I shall be very thankful to you. Yours Obediently, Name: _____ Designation: Mobile No: _____ CNIC: ____ Date: _____ Signature: _____ Supported by IT & Statistical Department THQ Hospital Ahmadpur East Received By _____ Applicant: Signature: Designation _____ CNIC:____ Received Date: _____ Receiving Dept:_____

Application Subject: ______