West Bengal Medical Council

IB 196, Sector III , Salt Lake, Kolkata – 700 106

2335 – 5575, 5663, 3078 Email : wbmc@vsnl.net

			ICE USE ONLY				
			Rs. 400.00 dated			•	Receipt
						Cashi	er, WBMC
	ot Rs. 400.00 Ir Hundred only)	Certified that the (a) Name is still borne and (b) Signature seems to be genuine. Approval may be accorded for Change of Address in the records and issue of fresh Updated Registration Certificate.					
646	D !! A	Date :			Dealin	ıg Assistan	t, WBMC
Date :	Dealing Assistant, WBMC	Approved					
			Regis	trar, W	ВМС		
	Applic	ation <u>For</u>	m for change	of add	dress		
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© Debasis : Desktop : Proforma : Change of Address Form.doc

Reference: Council's decision dated 28-09-2004