****A logo for a library

Description automatically generated with low confidence**Rawalpindi Medical University, Rawalpindi**

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**Please tick only one**

**Request Form for Journals Subscription at RMU NTB Library**

**Name of Department:**

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| **S.No** | **Name of Journals** | **Place & Publisher** | **Qty** | **Year** | **Quarterly** | **Monthly** | **Annual** | **Hard Copy** | **E. Journals** | **Amount** |
| **01** |  |  |  |  |  |  |  |  |  |  |
| **02** |  |  |  |  |  |  |  |  |  |  |
| **03** |  |  |  |  |  |  |  |  |  |  |

**Signature with Stamp Respective Head of Department**

**Respective Dean**

**Library Incharge / Library Affair**

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