

Form 7

(See Rule 61)

Form of individual Notice for renewal of Registration

To

(Here mention the name and last known address of the medical practitioner)

Sir,

In pursuance of clause (b) of section 223 of the Goa Medical Council Act, 1991, notice is hereby given that you should pay to the undersigned a fee of....rupees in cash or by crossed postal order or by money order or by demand draft payable in Panaji on or before*..... for the continuance of your name on the register under the said Act, for a further period of five years.

If you fail to pay the fee within the time stated above, your name shall be removed from the register as a defaulter.

Yours faithfully,

.....

Registrar

Goa Medical Council

Date.....

Address.....

*Here enter the date two months subsequent to the date of publication of general notice in the Goa Official Gazette.