











National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M.F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Fitment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
1.	D. Bindu D/o Krasadanam	Sc Palam Peddavaravudu	F	14y	40,000	K ₁	8/8/2023	9497	-	9497	-	-	-	-	-	-			Krasadanam	SC	No
2.	P. dingo Sriyalli D/o Pichu Reddy	Peddavaravudu (m) obula kaptali (v)	F	7y	40,000	K ₃	8/8/2023	9249	-	9249	-	-	-	-	-	-				SC	No
3.	E. Ajay Kumar B/o Musabiah.	S. Kothapalli Peddavaravudu mandalam	M	14y	45,000	K ₁	8/8/2023	9497	-	9497	-	-	-	-	-	-			S. Kothapalli	BC	No
4.	E. Trifura guru Akash S/o musabiah	S. Kothapalli Peddavaravudu mandalam	M	14y	45,000	K ₁	8/8/2023	9497	-	9497	-	-	-	-	-	-			S. Kothapalli	BC	No
5.	V. Satwek S/o Adamu	Peddavaravudu Rural	M	13y	40,000	K ₁	8/8/2023	9497	-	9497	-	-	-	-	-	-				F	No

IE COORDINATOR
 SAMAGRA SHRI
 PRAGASATI DISTRICT OFFICE

National Institute for the Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or/ Fimment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
6	D. Rasatebee P/o KaJavali	Gobburu Peddaravudu (m)	F	14	4000	V ₁	8/8/23	9497	-	9497	-	-	-	-	-	-			BC	BC	no
7	K. Guravaiah S/o Peddipapirih	Karrola peddaravudu (m)	M	13	4000	V ₁	8/8/23	9497	-	9497	-	-	-	-	-	-			BC	BC	no
8	CH. Karaladevi gavi	Karrola peddaravudu (m)	F	8	4500	V ₃	8/8/23	9249	-	9249	-	-	-	-	-	-			BC	BC	no
9	CH. Sivalli P/o chinna Narasani	Karrola peddaravudu (m)	F	12	4000	V ₁	8/8/23	9497	-	9497	-	-	-	-	-	-			BC	BC	no
10	D. Ayesha P/o. Kasaiak	Puchakeyala Palli peddaravudu (m)	F	12	4000	V ₁	8/8/23	9497	-	9497	-	-	-	-	-	-			BC	BC	no

IE COORDINATOR
 SAMAGRA SP
 PRANAVI

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Ad (given)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total Cost of Ad	Subsidy Provided	Travel cost paid to our station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
11	Korra Hemanth S/o Venkateswara Naik	Kalanuthala (v) Peddaravulu (m)	m	10y	11000	1/3	28/8/2023	9249	-	9249	-	-	-	-	-	-				ST	
12	P. Yuvateja S/o Ramiah	S. Kothapalli Peddaravulu (m)	m	6y	9000	1/3	28/8/2023	9249	-	9249	-	-	-	-	-	-				SC	
13	D. Johnson S/o Subbarao	ISAKUTHALA T. Venkata P. Charuvu Mandal	m	7y	45000	1/3	28/8/2023	9249	-	9249	-	-	-	-	-	-				SC	
14	D. Sree Lakshmi Lakshmi S/o Rama Venkata Reddy	R. V. R. Reddy (R) R. Charuvu (m)	f	11y	45000	1/3	8/8/2023	9249	-	9249	-	-	-	-	-	-				SC	
15	K. Venkatesh S/o. Chinna Babu	Dornala m Pradeepanidhi	m	12	10000	1/3	08/08/23	9497	-	9497	-	-	-	-	-	-				SC	

IE COORDINATOR
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 TELANGANA

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Fitting Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
16	D. Senthil	S/o Rangya Yallu Aschavada onsite.	M	14	10000/-	K 4	8-8 -223	1497	-	1497	-	-	-	-	-	-			BC	NO	
17	SKALLI	S/o Rangya Prasa CHALLAPETA Aschavada onsite.	M	15	6000/-	K 4	8-8 -223	1497	-	1497	-	-	-	-	-	-			BC	NO	
18	SK. Moulali	S/o Rangya Prasa Aschavada onsite.	M	14	6000/-	K 4	8-8 -223	1497	-	1497	-	-	-	-	-	-			BC	NO	
19	G. Pavan Kumar	S/o Anjanulu Aschavada onsite.	M	12	10000/-	K 4	8-8 -223	1497	-	1497	-	-	-	-	-	-			BC	NO	
20	G. Vasanth Kumar	S/o Naga sriya Chapalamadugu P-Cheruvu(M) Prakasam	M	11	4000/-	K 3	8-8 2023	1241	-	1241	-	-	-	-	-	-			SC	No	

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National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of






ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Payment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Castle	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
21	SK. Thahasim	1-7 A Arabasthan Center Donakonda mandal Prakasam(DT)	F	15y	40000/-	K IV 4	08/08/23	9497	-	9497	-	-	-	-	-	-			SK. Thahasim	OC	NO
22	P. Subbarao	Indalacheruvu (vi) Donakonda(m) Prakasam(DT)	M	15y	40000/-	K IV	08/08/23	7497	-	7497	-	-	-	-	-	-			P. Subbarao	OC	NO
23	V. Neelapalan Eswar	(-1500/-) Kochharakota (vi) Donakonda(m) Prakasam(DT)	M	6y	40000/-	K II	08/08/23	7092	-	7092	-	-	-	-	-	-			V. Neelapalan Eswar	OC	NO
24	D. Manikanta	Donakota (vi) Donakonda(m) Prakasam(DT)	M	16y	40000/-	K IV	08/08/23	9497	-	9497	-	-	-	-	-	-			D. Manikanta	OC	NO
25	B. Venkata Thirapethiah	Aravallipady (vi) Donakonda(m) Prakasam(DT)	M	14y	50000/-	K IV	08/08/23	9497	-	9497	-	-	-	-	-	-			B. Venkata Thirapethiah	OC	NO

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 PRAKASAM DISTRICT, GHISIL

Register to be Maintained by the Agencies Implementing the Scheme of



ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Ad (given)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Operation undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb impression)	Photo	Whether Accompanied By Escort	Case	When did you last received Aid
26	M. Venkata Veeransanjyulu	Reddagudi Pady (vi) Donakonda (vi) Prakasam (DT)	M	9y 3 months		K ₃ III	08/08/23	9249	-	9249	-	-	-	-	-	-	M. Venkata Veeransanjyulu		BC	No	
27	SR. Ravi	Donakonda (vi) Donakonda (vi) Prakasam (DT)	M	9y 6 months		K ₃ III	08/08/23	9249	-	9249	-	-	-	-	-	-	SR. Ravi		OC	No	
28	P. Venkata Ramana	Aravallipady (vi) Donakonda (vi) Prakasam (DT)	F	11y 4 months		K ₃ III	08/08/23	9249	-	9249	-	-	-	-	-	-	P. Venkata Ramana		OC	No	
29	P. Bharathi	Chennu Reddy Pally. Thankabudhi Prakasam	F	10y 6 months		K ₃ III	08/08/23	9249	-	9249	-	-	-	-	-	-	P. Bharathi		SC	No	
30	T. Prema Kumar	Donnala (vi) Donnala (vi) Prakasam (DT)	M	11y 6 months		K ₃ III	08/08/23	9249	-	9249	-	-	-	-	-	-	T. Prema Kumar		BC	No	

IE COORDINATOR
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PRAKASAM DISTRICT ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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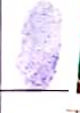



ANNEXURE - III

Sl No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Finance or Payment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary (Thumb impression)	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
31	K. Ramasankar	majulavarath (R) marthapur Methala Pradesh -523316	F	13	36,000	Ky.	8-8-2023	9497	-	9497	-	-	-	-	-	-			K. Pithambaram	BC	No.

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National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of





ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Fitters Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
32	M. Alina Reblum	D/ Vali Begun Vali Begun Chimburu Prakasam Dt	F	15	1548000	K4	8/8/23	9497	-	9497	-	-	-	-	-	-			M. Alina Reblum	OC	15
33	St. Matha	St. Matha Chimburu Prakasam Dt	F	13	650000	K4	8/8/23	9497	-	9497	-	-	-	-	-	-			St. Matha	BC	16
34	K. Ashok	St. Anireddy Chimburu Prakasam Dt	M	13	480000	K4	8/8/23	9497	-	9497	-	-	-	-	-	-			K. Ashok	BC	16
35	St. Divyashree	St. Matha Chimburu Prakasam Dt	F	16	500000	K4	8/8/23	9497	-	9497	-	-	-	-	-	-			St. Divyashree	BC	16
36	St. Samara	St. Matha Chimburu Prakasam Dt	F	15	480000	K4	8/8/23	9497	-	9497	-	-	-	-	-	-			St. Samara	BC	16

IE COORDINATOR
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 PRAKASAM DISTRICT

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

SL NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Education or Parent Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
37	N. Durga Bhavani	Dosaitya Narayana Chumbani Prakasham Pt	F	11	5000/-	Sp	8/8/23	9117	-	9117		-	-	-	-	-			N. Durga Bhavani	BC	MD
38	S. Babu	Do Krishna Babu Ongole Prakasham Pt	M	15	36000/-	Ku	8/8/23	1417	-	1417		-	-	-	-	-			S. Babu	OC	MD


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SAMAGRA SHIKSHA
PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - II

Sl. No.	Name of the Beneficiary	Address	Sex	Age	Income	Type of A/c given	Date on which given	Cost of A/c	Repayment on Interest charges	Total Cost of A/c	Subsidy Provided	Have cost paid to the donor/beneficiary	Start and ending expense paid	Whether any surplus/Carryover Undertaken	Total 11+12+14+15	No. of Days for which asked	Signature of Beneficiary/Parent/Institution	Photo	Whether Accommodated by Govt?	Category	Other 19+20+21
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
39	SK. Suresh	S/o Shaikh Hasnain, Chintamani onsole	M	15	4000	4	8-8-2023	9497	-	9497	-	-	-	-	-	-			SK. Suresh	BC	NO
40	SK. Mohan Khader	S/o Shabbir Chintamani onsole	M	8	5000	3	8-8-2023	9249	-	9249	-	-	-	-	-	-			SK. Mohan	BC	NO
41	C. Chandra Sekhara	S/o Linga Jao, Chintamani onsole.	M	6	6000	4	8-8-2023	9497	-	9497	-	-	-	-	-	-			C. Chandra	BC	NO
42	P. Harshitha	P/o. Kishor Chintamani onsole	F	9	4000	3	8-8-2023	9249	-	9249	-	-	-	-	-	-			P. Harshitha	BC	NO
43	SK. Bhanu	P/o. SK. Bhanu Chintamani onsole	F	18	4000	4	8-8-2023	9497	-	9497	-	-	-	-	-	-			SK. Bhanu	BC	NO

IE COORDINATOR
 SAMAGRA SHIKSHA
 PULAKAM DISTRICT OFFICE

Register to be Maintained by the Agencies Implementing the Scheme of
For the Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad

ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	M/F	Age	Income	Type of A/I (Spec)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total cost of Aid	Subsidy Received	Share cost paid (Total share Beneficiary)	Board and Lodging expenses Paid	Where Are Surgery Done/Inpatient	Total 12+13+14+15	No. of Days for which Stayed	Signature of Beneficiary (Thumb Imprint)	Photo	Whether Accompanied By Escort	Code	When did you last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
44	K. Vithal Krishna	D/o. Ramachandraiah 176-3234 A.P. Housing Board Near Sai Baba temple Angole	F	15	15000/-	23/05/2023	11	9497	-	9497	-	-	-	-	-	-			K. Raj OC		No
45	S. Akbar Ali	S/o. Mahabub Khan M 35-11-95/2 Sathavaram Angole	M	11	10000/-	08/08/23	11	9497	-	9497	-	-	-	-	-	-			K. Raj OC		No
46	M. Rishi	S/o. Ramapad Angole	M	11	20000/-	08/08/23	11	9497	-	9497	-	-	-	-	-	-			K. Raj SC		No
47	N. Gayathri	D/o. Anand 2-1-1-59/6 P. Raja Rao Nagar Temple back side Angole	F	11	40000/-	08/08/23	11	9497	-	9497	-	-	-	-	-	-			K. Raj SC		No
48	V. Prakash Raj	S/o. Nagaraju H.No 2/2-1-116/56 Street Road Thiruvu Khanna Angole	M	11	60000/-	08/08/23	11	7247	-	7247	-	-	-	-	-	-			K. Raj SC		No

IE COORDINATOR
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 PRAKASHI DISTRICT ANGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Familiarity or Former Charges	Total Cost of Aid	Subsidy Provided	Trip cost paid to our station Beneficiaries	Board and Lodging expense Paid	Whether Any Surgical Operation Undertaken	Total 17-19+24+15	No of Days for which stayed	Signature of Beneficiary's Parent/Institution	Photo	Whether Accompanied By Escort	Code	When did you last received Aid	
49	Jitika Sridakshmi	Ido. Balakrishna chervu Kommapalle ANGLE(M) Prakasham Dist. AP	F		45000/-	15/3	8/3/23	9249	-	9249	-	-	-	-	-	-			20/08/23	BC	13/12	No
50	Palepu Daniel Abhinav	S/o Arun Ongole	M	9	10000/-	K2	8/5/23	9249	-	9249	-	-	-	-	-	-			10/03/24	BC		No
51	Gowri Srilatha	S/o. Sanku Ongole	F	5	80000/-	K2	2/5/23	9092	-	9092	-	-	-	-	-	-			G. Sanku	BC		No
52	Nissarala Gayatri	D/o Venkateswar Reddy	F	5	30000/-	K2	3/3/23	9092	-	9092	-	-	-	-	-	-			Nissarala Venkateswar Reddy	BC-D		No
53	P. Ajay Kumar	Thiruvaganur (R) Ongole (AP)	M	18	30000/-	K4	08/08/23	9497	-	9497	-	-	-	-	-	-			P. Srinivasulu Reddy	BC		No

IE COORDINATOR
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 PRAKASHAM DISTRICT ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (purs)	Date on which Given	Cost of Aid	Faculties or Items Given	Total Cost of Aid	Salary Provided	Travel and other expenses	Board and Lodging expenses	Whether any Surgical or Medical Undertaken	Total 12+13+14+15	No of Days for which stated	Signature of Beneficiary	Photo	When Accompanied By Escort	Class	When did you last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
54	A. Gayathri	Slo. Nivivasa Rao Near FCI ongole (M)	F	11	30000	K ₃	8/8/22	9249	—	9249	—	—	—	—	—	—			Ch. Anjanna	BC	NO
55	K. Venkatesh	Slo. Kalaiah Pellur ongole (M)	M	14	40000	K ₄	8/8/22	9497	—	9497	—	—	—	—	—	—			K. Venkatesh	BC	NO
56	K. Ranikiran	Slo. Kalah Pellur (M) ongole	M	13	40000	K ₄	8/8/22	9497	—	9497	—	—	—	—	—	—			K. Ranikiran	BC	NO
57	K. Lakshmi Chaitra	D/o Mala Kondalreddy Kamma Palem ongole (M)	F	10	66000	K ₃	8/8/22	9249	—	9249	—	—	—	—	—	—			S. S. S. S.	BC	NO
58	SK. Sudar	Slo. Chinnam Kote Veeda State Babaji complex ongole (M)	M	10	30000	K ₃	8/8/22	9249	—	9249	—	—	—	—	—	—			SK. Sudar	BC	NO

COORDINATOR
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 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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ANNEXURE - III

Sl No	Name of the Beneficiary	Address	MF	Age	Income	Type of Aid Given	Date on which Given	Cost of Aid	Excess on Project Charges	Fee Cost of Aid	Subsidy Provided	Prize cost paid to out station beneficiary	Board cost including medical fee	Whether Any Surgical Operation undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary / Parent / Guardian	Photo	Whether Accompanied By Escort	Grade	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
59	B Yeswanth	Sl. No. Srikalah Mamidi Palem Ongole (M)	M	8	25000/-	K ₃	08/08/23	9249	-	9249	-	-	-	-	-	-			SC	NO	
60	N. J. Lakshmi Sai Suresh	Sl. No. Venkata Siva Kannur R.P. Road 13th Ongole (M)	F	21	12000/-	K ₁	08/08/23	9447	-	9447	-	-	-	-	-	-			BC	NO	
61	L. Madhavi	Sl. No. Adityaiah	F	8	14000/-	K ₃	08/08/23	9249	-	9249	-	-	-	-	-	-			ST	NO	
62	V. Bharath Reddy	Sl. No. Venkata Chalapati Jannamthota Ongole (M)	M	10	30000/-	K ₃	08/08/23	9249	-	9249	-	-	-	-	-	-			BC	NO	
63	M. Venkatesh	Sl. No. Subbarath Karamachil Ongole (M)	M	11	20000/-	K ₃	08/08/23	9249	-	9249	-	-	-	-	-	-			BC-A	NO	

IE COORDINATOR
 SAMAGHA SHIKSHA
 PRAGASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Fabrication or Fitterment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Cast	When did you Last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
64	K. Syeswathi	St. Venkata Krishna Kurian Gopal Nagar 4th line Ongole (M)	M	10	36000/-	K ₃	02/08/23												CC	No	
65	R. Mahala	Sto. Suresh Ongole	F	9	30000/-	K ₃	02/08/23												SC	No	
66	M. Sanyasani Double entry	Sto. Ravikiran Near KIMS Hospital Ongole (M)	M	9	90000/-	K ₃	02/08/23												CC	No	
66	V. Subhakar	Sto. Anjula Thiruvengaluru Ongole (M)	M	10	20000/-	K ₃	02/08/23												CC	No	
67	A. Johnson Babu	Sto. Ramesh Karavandi (V) Ongole (M)	M	15	17000/-	K ₄	02/08/23												SC	No	

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National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Portion of Project Charge	Total Cost of Aid	Subsidy Provided	Travel cost paid to our station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which Aided	Signature of Beneficiary/Trustee/Institution	Photo	Whether Accompanied by Escort	Caste	When did you Last received Aid?
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
63	D. Nishith	S/o Petha Jinnabai, Manndipale, Ongole (M)	M	8	5000/-	K-3	8/8/23	9249	-	9249	-	-	-	-	-	-			D. Nishith	SC	NO
64	B. Siva Ganesh	S/o Venkateswaraiah, Ongole	M	15	3000/-	K-4	8/8/23	9447	-	9447	-	-	-	-	-	-			B. Siva Ganesh	BC	NO
70	D. Davansri	S/o Lakshmi, Karayana, Ongole	M	13	4000/-	K-4	8/8/23	9447	-	9447	-	-	-	-	-	-			D. Davansri	BC	NO
71	B. Divya	D/o Rangarao, Guntur, Ongole (M)	F	14	3000/-	K-3	8/8/23	9249	-	9249	-	-	-	-	-	-			B. Divya	BC	NO
72	P. Venkata Maikanta	S/o Venkateswaraiah, Chennukommu, Palasa, Ongole (M)	M	20	1500/-	K-4	8/8/23	9447	-	9447	-	-	-	-	-	-			P. Venkata Maikanta	BC	NO.

IE COORDINATOR,
SAMAGRA SHIKSHA,
PRASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

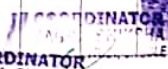
Sl NO	Name of the Beneficiary	Address	Sex	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Fabrication or Filled Charges	Total Cost of Aid	Security Provided	Travel cost paid to and station Beneficiary	Board and Lodging expense Paid	Whether Any Serious Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Gate	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
3	Sattishok	Harijanapalem Kanigisi.	M	7y	50,000	ID Kit K ₃	9/8/21	9249	-	9249	-	-	-	-	-	-			Sc	5028	6
4	Ch. Thanrao Suresh	Potemjadipally Kanigisi	M	9y	50,000	ID Kit K ₃	9/8/21	9249	-	9249	-	-	-	-	-	-			Be	5028	6
5	S.K. Akhmad	Mangalamma Kanigisi	M	11y	50,000	ID Kit K ₃	9/8/21	9249	-	9249	-	-	-	-	-	-			Be	5028	6
6	K. Jashwanth	Chinnalavula Peth Kanigisi	M	14y	50,000	ID Kit K ₄	9/8/21	9249	-	9249	-	-	-	-	-	-			Sc	5028	6
7	K. Bhavani	Kanigisi	F	10y	50,000	ID Kit K ₃	9/8/21	9249	-	9249	-	-	-	-	-	-			Be	5028	6

THE COORDINATOR
 SAMAGRA SHIKSHA
 PRAKASHI DISTRICT OFFICE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication and Element Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thru Imposition	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
78	M. Varstha	B/o Chenchu Ramachary Zaryumalli Prakasham Pt	F	14	8000/-	K 4	9-8-2023	9497	-	9497	-	-	-	-	-	-			M. Chandraiah	OC	NO
79	V. Sathya Kumar	B/o Ramudu Mundlamuru Prakasham Pt	M	9	6000/-	K 3	9-8-2023	9249	-	9249	-	-	-	-	-	-			V. Madhya	BC	NO
80	SK. Junedh Athanath	B/o Kasthulla mundlamuru Prakasham Pt.	M	9	80,000/-	K 3	9-8-2023	9249	-	9249	-	-	-	-	-	-			SK. Sathya	BC	NO
81	M. Prey Kumar	B/o Yohan mundlamur Prakasham Pt.	M	8	50,000/-	K 3	9-8-2023	9249	-	9249	-	-	-	-	-	-			Chandras	SC	NO
82	P.M.L. Venkata Sai charan	B/o Ramanaiah HM Sade Prakasham Pt	M	10	50,000/-	K 3	9-8-2023	9249	-	9249	-	-	-	-	-	-			POSAJYU	BC	NO


IE COORDINATOR
SAMAARA SHIKSHA
FRANKSAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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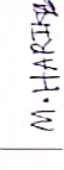



ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	HF	Age	Income	Type of Aid (person)	Date on which Given	Cost of Aid	Fabrication on Element Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station beneficiary	Board and Lodging expense Paid	Whether Any foreign Certificate Distortion	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied by Escort	Grade	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
1	M. Sanyal Jeen	S/o. Pavikisan S. U Padu onsole	M	10	Sanyal K3	9-8-2023	9249	-	9249	-	-	-	-	-	-	-			M. Sanyal Jeen	SC	5
2	A. Arjun	S/o Kotarich S. U Padu onsole.	M	10	Sanyal K3	9-8-2023	9249	-	9249	-	-	-	-	-	-	-			A. Arjun	SC	5
3	K. R. Hanumanth	S/o. Hanumanth S. U. Padu onsole.	M	8	Sanyal K3	9-8-2023	9249	-	9249	-	-	-	-	-	-	-			K. R. Hanumanth	SC	5
4	M. Ujshu Nishan	S/o. T. D. Pathi S. U. Padu onsole.	M	21	Sanyal K4	9-8-2023	9249	-	9249	-	-	-	-	-	-	-			M. Ujshu Nishan	SC	5
5	T. Haradharani	S/o. S. K. Haradharani S. U. Padu onsole	M	8	Sanyal K3	9-8-2023	9249	-	9249	-	-	-	-	-	-	-			T. Haradharani	SC	5

IE COORDINATOR
SAMAGRA SHIKSHA
PRAKASAM DISTRICT, ANGOLI

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M.F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Payment Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary (Thumb impression)	Photo	Whether Accompanied By Escort	Cost	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
00	B. Sankhali	S/o. Boramachi Sinsingakonda ongole.	M	14	6000/-	K ₄	9-8-2023	9497	-	9497	-	-	-	-	-	-				5	No
01	S.K. Fakhara	D/o. Subhani Sinsingakonda ongole	F	10y	3800/-	K ₃	9-8-2023	9249	-	9249	-	-	-	-	-	-			1000-98	BC	No
04	S.K. Suman Nashra	S/o. Subhani Sinsingakonda ongole	M	11	3800/-	K ₄	9-8-2023	9497	-	9497	-	-	-	-	-	-			800-98	BC	No
01	M. Harika Cashmi	D/o. Sweshbala Sinsingakonda ongole.	F	13	6000/-	K ₄	9-8-2023	9497	-	9497	-	-	-	-	-	-	M. HARIKA 		M/Carakonda	BC	No
09	G. Ujjwala	D/o. Pradha Sondhi	F	14	6000/-	K ₃	9-8-2023	9249	-	9249	-	-	-	-	-	-			1500-98	BC	No

IE
SAMANTHA
FRANASAM DISTRICT
COORDINATOR
NIGRA SHIKSHA
DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of







ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M.F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and lodging expense Paid	Whether Any Surgical Correction Undertaken	Total (12+13+14+15)	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
93	T. Nayyasa	D. Srinivasa zeddy singaforada ongale.	F	13	6000/-	K4	9-8-2023	9497	-	9497	-	-	-	-	-	-			T.S. Nayy.	OC	No
94	K. Lakshmi	S/o. Visayalash singaforada ongale.	M	14	1000/-	K4	9-8-2023	9497	-	9497	-	-	-	-	-	-			K. Visayalash	BC	No
95	S. Kalyani	D/o Venkatesh singaforada ongale.	F	14	1000/-	K3	9-8-2023	9249	-	9249	-	-	-	-	-	-			BC	BC	No
96	G. VENKATA	Subbanna Pamuru ongale	M	19	4000/-	K4	7-8-2023	9497	-	9497	-	-	-	-	-	-			G. Subbanna	BC	No
97	G. RUFUS MICHAEL	S/O DEVA RAJ PUNMU RUVU YADDANPUDI PAMURU ongale	M	11	2000/-	K3	9-8-2023	9249	-	9249	-	-	-	-	-	-			G. Deva Raj	ST	No

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAYASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (per)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total Cost of Aid	Subsidy Provided	Treat cost paid to out of their Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which Stayed	Signature of Beneficiary (Thumb Imprint)	Photo	Whether Accompanied By Escort	Case	When did you last received Aid	
98	J Prasanna Kumasi	D/O Sumanika Tripuranthakam Mandal AB colony (V) Prakasham(DT)	F	10	70,000	ID Kit 3	9/8/2023	9249	-	9249	-	-	-	-	-	-			J Saswathi	SC	NO	
99	B Venkat	s/o Channa Anil Kumar Miranthakam Mandal AB colony Prakasham(DT)	M	13	80,000	ID Kit 4	9/8/2023	9497	-	9497	-	-	-	-	-	-			B Channa Anil Kumar	SC	NO	
100	Y. Prasanna	s/o Prabhakar Gollapalli (V) Tripuranthakam Mandal Prakasham(DT)	M	15	80,000	ID Kit 4	9/8/2023	9497	-	9497	-	-	-	-	-	-			Y. Prabhakar	SC	NO	
																					NO	
																						NO

IE COORDINATOR
 SAMAJIKA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of



ANNEXURE - III

Sl No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Fabrication on Fitted Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
101	T. Abhinav భాస్కర్	S/o. Ramaswamy S.P. Babu Onole	M	15	4000/-	K ₂	9-8-2023	9497	-	9497	-	-	-	-	-	-			T. Subhashini	SC	No
102	K. Sivarani కాంత	S/o. K. Venkata Sri. Venkata Sripalem Onole	M	11	4000/-	K ₃	9-8-2023	9249	-	9249	-	-	-	-	-	-			K. Venkata	ST	No
103	G. Prabhakar కాంత	S/o. C. Chandra Tanavud Onole.	M	11	5000/-	K ₃	9-8-2023	9249	-	9249	-	-	-	-	-	-			T. Subhashini	SC	No
104	G. Ganasundhar కాంత	S/o. Babu P.C. Palli Onole	M	11	12000/-	K ₃	9-8-2023	9249	-	9249	-	-	-	-	-	-			G. Ravi	SC	No
105	S. Vinay కాంత	S/o. Narayana C.S. Phary Prakasam St. Onole	M	12	60000/-	K ₄	9-8-2023	9497	-	9497	-	-	-	-	-	-			S. Vinay	OC	No

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III











Sl No	Name of the Beneficiary	Address	M.F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or/and Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
200	K. Charamya	Shri Balurani Reddy Tangyiter Prakaram Dt	F	10	48000	K ₂	9/18/20	9092	-	9092	-	-	-	-	-	-	Person K. Balurani Reddy		Be	No	
100	Sh. Nazeema	Shri Masthanvali Tangyiter Prakaram Dt	F	16	75000	K ₂	9/18/20	9497	-	9497	-	-	-	-	-	-	Sh. Nazeema		Be	No	

IE COORDINATOR
 S. SAMAGRA SHINSHA
 PR. PRAKASAM DISTRICT, ONGOLE

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 SAMAGRA SHINSHA
 PR. PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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









ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (egm)	Date on which Given	Cost of Aid	Exemption on Parent Charge	Fee Paid	Subsidy Provided	Grant not part to our scheme Beneficiary	Board and lodging Examined	Written Any Surgical Examination undertaken	Total 12+11+14+11	No of Days for which stayed	Signature of Beneficiary (where applicable)	Photo	Whether Accompanied By Parent	Grade	When 0-15 yrs. Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
1	Bajaykumar	Kotturu, Kanigiri	M	14y	4500	ID Kit 1/2	9/8/23	9497	-	9497	-	-	-	-	-	-			J. Srinivasulu Reddy	BC	NO
2	K. Doo Raju	H.H. Padu	M	7y	4500	Kit 3	9/8/23	9249	-	9249	-	-	-	-	-	-			K. Srinivasulu Reddy	PL	NO
3	M Nihal	Elakandepudi P. C. Belli	M	8y	3700	Kit 3	9/8/23	9249	-	9249	-	-	-	-	-	-			M. R. Nageswara Rao	OC	NO
4	Andra Teja	Peda Tilipadu P. C. Belli	M	8y	4500	Kit 3	9/8/23	9249	-	9249	-	-	-	-	-	-			A. Srinivasulu Reddy	SC	NO
5	T. Anurag	S/o Ishrak onbaleat	F	14	2500	Kit 1	9/1/23	9497	-	9497	-	-	-	-	-	-			R. Srinivasulu Reddy	SC	NO

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAGASAHI

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

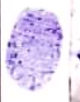









ANNEXURE - III

Sl No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid Given	Date on which Given	Cost of Aid	Fabrication and Fitters Charges	Total Cost of Aid	Subsidy provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thru Impression	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
1	P. Bharu	S/o. D. Jata maich Jazariwally condelet	M	13	8000	Ry	9-8-2023	9497	-	9497	-	-	-	-	-	-				PL	100
2	B. Venkata Anilapete	S/- G. Venkatesh Konatarambally condelet	M	8	6000	Ry	9-8-2023	9249	-	9249	-	-	-	-	-	-				OC	10
3	T. Charan Brahma Teja	S/o. Brahmeswari Rao Ponnalunmandal Prakasam Dt	M	8	6000	Ry	9-8-2023	9249	-	9249	-	-	-	-	-	-				T 0080	10
4	P. Navya poornima	M/o. Neerashimha Rao Ponnalunmandal Prakasam Dt	F	7	6000	Ry	9-8-2023	9249	-	9249	-	-	-	-	-	-				Prakasam Dt	10
5	D. Chandhan	D/o. Venkatesh Reddy M. Kondalwari mandal condelet	F	10	6000	Ry	9-8-2023	9249	-	9249	-	-	-	-	-	-				OC.	10

COORDINATOR
 SAMICCA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Repair Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Caste	When did you last received Aid?
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
119	P. Sri Ranga Sai	S/o Rama Ranga Sthomy Chiddalur Prakasam Dt	M	13	50,000/-	K ₂	29/10/23	9497	-	9497	-	-	-	-	-	-			OC	No	
119	Oh. Pavani Sarva	S/o Pradeep Chiddalur Prakasam Dt	M	14	50,000/-	K ₄	29/10/23	9497	-	9497	-	-	-	-	-	-			OC	No	
120	J. Venkata Jaganthia	S/o Srinivas Chiddalur Prakasam Dt	F	7	50,000/-	K ₃	29/10/23	9249	-	9249	-	-	-	-	-	-			BC	No	
121	T. Pritha	S/o Srinivasulu Chiddalur Prakasam Dt	F	13	60,000/-	K ₄	29/10/23	9497	-	9497	-	-	-	-	-	-			OC	No	
122	P. Venkatesai	S/o Srinivasulu Chiddalur Prakasam Dt.	M	13	50,000/-	K ₄	29/10/23	9497	-	9497	-	-	-	-	-	-			BC	No	

COORDINATOR
 SAMAGRA SHIKSHA
 PRASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	M.F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication on: Element Charges	Total Cost of Aid	Subsidy provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary's Thumb Impression	Photo	Whether Accompanied By Escort	Centre	When did you Last received Aid.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
121	J. Thurian Reda	S/o Lakshmi Cuddalur Prakasam Dt.	M	14	58,000	K ₄	9/18/23	9497	-	9497	-	-	-	-	-	-			OC	No	
124	M. Suresh Kumar	S/o Subrahmanyam Cuddalur Prakasam Dt.	M	16	58,000	K ₄	9/18/23	9497	-	9497	-	-	-	-	-	-			OC	No	
123	Y. Sravan i	O/o Ramireddy Cuddalur Prakasam Dt.	F	12	58,000	K ₂	9/18/23	9497	-	9497	-	-	-	-	-	-			OC	No	
125	C. Ranjit Kumar	S/o Ranganna Cuddalur Prakasam Dt.	M	12	60,000	K ₄	9/18/23	9497	-	9497	-	-	-	-	-	-			OC	No	
127	M. Bhuvaneshwari	O/o RaJamma Beethenipada Prakasam Dt.	F	7	58,000	K ₃	9/18/23	9497	-	9497	-	-	-	-	-	-			OC	No	

IE COORDINATOR
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 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid given	Date on which Given	Cost of Aid	Fabrication and Escort Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging Expense Paid	whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary's Thump Imposition	Photo	Whether Accompanied By Escort	Caste	When did You Last received Aid
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
122	G. Navya	veligandla	F	14	50,000	MR Kit 6	9/8/23	9497	-	9497	-	-	-	-	6505	-			G. Kanthi	SC	6
123	N. Riyamaziyan	Gannavaram, veligandla Mandal	F	6y	50000	MR Kit 2	9/8/23	9002	-	9002	-	1	-	-	-	-				SC	6
124	G. Venkatesh	Mogalluru, veligandla Mandal	F	7y	60000	ID Kit 3	9/8/23	9241	-	9241	-	-	-	-	-	-				OU	6
125	Ch. Shyam Kumar	Gannavaram, veligandla Mandal	M	10y	50000	ID Kit 3	9/8/23	9241	-	9241	-	-	-	-	-	-			CH. E. S. Lakshmi	SC	6
126	M. Dinesh	Gannavaram, veligandla Mandal	M	15y	50000	ID Kit 4	9/8/23	9247	-	9247	-	-	-	-	-	-			M. Dinesh	OC	6

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Ad (given)	Date on which Given	Cost of Ad	Fabrication or Fictitious Charges	Total Cost of Ad	Locality provided	Travel cost paid to institution/Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/Thrupa Impression	Photo	Whether Accompanied By Escort	Cast	When did you last received Ad
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
150	K. Navya	S/o Kavitha Konerolu Prakasam Dt.	F	7	45,000/-	K3	9/18/23	9249	-	9249	-	-	-	-	-	-			Kavitha	BC	No
151	K. Rajendra Babu	S/o Subash Konerolu Prakasam Dt.	M	8	45,000/-	K3	9/18/23	9249	-	9249	-	-	-	-	-	-			Rajendra Babu	BC DC	No
152	J. Sudha	S/o Rajesh Konerolu Prakasam Dt.	F	8	45,000/-	K3	9/18/23	9249	-	9249	-	-	-	-	-	-			J. Rajesh	BC	No
153	S. Idmail	S/o Hussain Konerolu Prakasam Dt.	M	8	45,000/-	K3	9/18/23	9249	-	9249	-	-	-	-	-	-			S. Hussain	BC	No
154	S. Suresh, Ranga Reddy	S/o Lakshmi Reddy Konerolu Prakasam Dt.	M	14	50,000/-	K4	9/18/23	9497	-	9497	-	-	-	-	-	-			S. Lakshmi	OC	No

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - II

Sl No	Name of the Beneficiary	Address	Age	Sex	Income	Type of Aid (Grant)	Date of Birth (DD/MM/YY)	Code of Aid	Education in Progress (Details)	High School (Yes/No)	Intermediate (Yes/No)	College (Yes/No)	Employment (Yes/No)	Other (Yes/No)	Total (12+13+14+15)	No. of Days in which absent	Signature of Beneficiary (If available)	Photo	Signature of Beneficiary (If available)	DOB	Other NO. IN THE REGISTER
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
3	B. Venkata Eshwaramma	S/o Balakrishna K. K. Mitta Prakasham Dt.	12	F	50000/-	K-4	9-08-2023	12000	12000	-	-	-	-	-	-	-			B. Venkata Eshwaramma	02	NO
4	I. Sarany Teja	S/o Chitra Anandiah C.S. Prasad Prakasham Dt.	11	M	30000/-	K-3	9-08-2023	12000	12000	-	-	-	-	-	-	-			I. Sarany Teja	02	NO
5	S. Anandiah	S/o Peddumadala C.S. Prasad Prakasham Dt.	10	M	50000/-	K-3	9-08-2023	12000	12000	-	-	-	-	-	-	-			S. Anandiah	02	NO
6	S. Padma Meelala	S/o Pedda Meelala C.S. Prasad Prakasham Dt.	12	M	50000/-	K-4	9-08-2023	12000	12000	-	-	-	-	-	-	-			S. Padma Meelala	02	NO
7	M. Sushranya	S/o Sivaraju C.S. Prasad Prakasham Dt.	16	F	50000/-	K-4	9-08-2023	12000	12000	-	-	-	-	-	-	-			M. Sushranya	02	NO

THE COORDINATOR
SAMAGRA

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (item)	Date on which Given	Cost of Aid	Fabrication or Element Charges	Total Cost of Aid	Subsidy provided	Travel cost part (out station beneficiary)	Board and lodging expense part	Whether Any Surgical Correction undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb impression)	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
105	P. Ramesh.	S/o. P. Jeyapathi Kondapi Onole	M	14	1000/-	K ₄	9-8-2025	9477	-	9477	-	-	-	-	-	-			Person	SC	5
106	A. Raghav.	S/o. A. bala Kondapi Onole	M	13	1000/-	K ₄	9-8-2025	9477	-	9477	-	-	-	-	-	-			Person	SC	5
105	N. V. Lakshya	D/o. N. V. Ranganaikata Kondapi Onole.	F	9	1000/-	K ₃	9-8-2025	9247	-	9247	-	-	-	-	-	-			Person	OC	5
106	Y. Sriram Vidat	S/o. Brahad Kondapi Onole	M	9	1000/-	K ₃	9-8-2025	9247	-	9247	-	-	-	-	-	-			Person	SC	5
107	K. Sathish bahu	S/o. Suman Kondapi Onole.	M	9	1000/-	K ₃	9-8-2025	9247	-	9247	-	-	-	-	-	-			Person	OC	5

1E COORDINATOR
 SAMAGRA SHIKSA
 DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of











ANNEXURE - III

Sl NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (perm)	Date on which Given	Cost of Aid	Fabrication or Fictitious Charges	Total Cost of Aid	Subsidy provided	Travel cost paid to out station beneficiary	Board and Lodging expense Paid	Whether Any Surgical Consultation Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	Whether Accompanied By Escort	Cast	When did you Last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		19	20	21
13	Cr. Kusuma	D/o Subba Kodali Orsola.	F	12	5000/-	1/4	9-5-2022	9497	-	9497	-	-	-	-	-	-			Cr. Subba	GC	
17	A. Vijaya Bhavani	Mottan.	F	14	10000/-	1/4	9-8-2023	9497	-	9497	-	-	-	-	-	-			A Maham	BC	
18	P. Siva Subramanyam	Anjanayulu	B	10	7000/-	3	9-8-2023	9249	-	9249	-	-	-	-	-	-			P. Siva Subramanyam	BC	
19	Ithadi Ratula	Sivanra Raju	B	9	5000/-	3	9-8-2023	9249	-	9249	-	-	-	-	-	-			Ithadi Ratula	SC	
15	G. Lalitha	D/o Paroniz Teluru Orsola	F	15	5000/-	1/4	9-5-2020	9497	-	9497	-	-	-	-	-	-				ST	

IE COORDINATOR
 SAMAGRA SHIKS
 PRAKASAM DISTRICT, ONGLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of

ANNEXURE - III

Sl. No	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (gvm)	Date on which Given	Cost of Aid	Fabrication on Formset Charges	Total Cost of Aid	Subsidy provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No of Days for which stayed	Signature of Beneficiary's Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you last received Aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
159	B. Vishnu hari	90 Baliyepalle Road Tahasa, 1-66. Prakasam	M	7	36,000	K ₃	-8-2023	9249	-	9249	-	-	-	-	-	-			B. Vishnu hari	BC	No
154	T. Haritha	7-662-m-16A Prakasam	F	8	36000	K ₃	-8-2023	9249	-	9249	-	-	-	-	-	-			T. Haritha	BC	No
155	C. Venkata Lakshmi	7-662-L-1 Prakasam	F	14	16000	K ₄	-8-2023	9297	-	9297	-	-	-	-	-	-			C. Venkata Lakshmi	ST	No
156	B. Jashrmi reddy	1-207B Prakasam (St)	F	13	36000	K ₄	-8-2023	9297	-	9297	-	-	-	-	-	-			B. Jashrmi reddy	OC	No
157	E. Venkatawanitha	1-208-P-113 Prakasam (St)	F	9	45000	K ₃	-8-2023	9249	-	9249	-	-	-	-	-	-			E. Venkatawanitha	BC	No

IE COORDINATOR
 SAMAGRA SHIKSHA
 PRAKASAM DISTRICT, ONGOLE

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
Register to be Maintained by the Agencies Implementing the Scheme of
Assistance to Disabled for Purchase / Fitting of Aids/Appliances

ANNEXURE - III

Sl. NO	Name of the Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which Given	Cost of Aid	Fabrication or Fitting Charges	Total Cost of Aid	Subsidy Provided	Travel cost paid to out station Beneficiary	Board and Lodging expense Paid	Whether Any Surgical Correction Undertaken	Total 12+13+14+15	No. of Days for which stayed	Signature of Beneficiary Thumb Impression	Photo	Whether Accompanied By Escort	Caste	When did you Last received Aids
158	SK. Satish N. Dharmaraja	St. Don Bosco Pulim Prakasam	M	11	4000/-	3	9-8-2013	9249	-	9249	-	-	-	-	-	-				BC	N/A
159	K. Raghunath	St. Peter's Kandukuru Prakasam	M	6	6000/-	2	9-8-2013	9092	-	9092	-	-	-	-	-	-				BC	N/A
160	C. Sivaram	St. Peter's Baldikonda Prakasam	M	14	3000/-	4	9-8-2013	9497	-	9497	-	-	-	-	-	-				BC	N/A

FORMAT OF TEST - CHECK REPORT Under ADIP Scheme
Test Check (Minimum of 10/15 percent%) of beneficiaries assisted during the year 2020-21
Name of the Implementing Agency : NIEPID, Secunderabad

Part - 1

Sl. No.	S.No. of List of the covered beneficiaries	Name of Beneficiaries	Gender	Age	Father/ Husband name	Complete Address	Contact Numbers	Place of camp	Type of Aid Given	Date of Camp	Whether any surgical correction undertaken	Date of test check	Findings of test check (eg distributed and working well/distribution confirmed but quality not satisfactory/distribution not confirmed, etc.)
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	5	V. Sathwik	Male	13yrs	Son of Adarnu	Peddasaveedu - Prakash AP	9642041116	SSA office prakash	Kit-4	8-8-2023	No	8-8-2023	Distributed confirmed and working well.
2	10	O. Ayesha	Fe	12y	D/O. Kasaiyah	Peddasaveedu Prakash A.P	9492377246	SSA office Prakash	Kit-4	8-8-2023	No	8-8-2023	Distributed confirmed and working well.
3	20	G. yeswanth Kumar	M	10y	S/O Nagasreeno	Charula Madusurya Polakchavali Prakasham	6301643062	SSA office Prakasham	Kit-3	8-8-2023	No	8-8-2023	Distributed confirmed and working well.
4	28	P. Venkatesh Ravana	F	11y	D/O Thirupathi ah	Dorankonda Prakasham	6304592675	SSA office Prakasham	Kit-3	8-8-2023	No	8-8-2023	Distributed confirmed and working well.
5	35	SK. Padalakon Eka - Dilsha	F	16y	D/O Mahabab Basha	Dim 8-47, nayak Street, Cumbum Prakasham	7959062322	SSA office Prakasham	Kit-4	8-8-2023	No	8-8-2023	Distributed confirmed and working well.
6	50	P. Ramel Abbasaham	M	9	S/O. P. Asen	Vetapalem Prakasham	9911260500	SSA office Prakasham	Kit-3	8-8-2023	No	8-8-2023	Distributed confirmed and working well.

Sl. No.	S No of List of the covered beneficiaries	Name of Beneficiaries	Gender	Age	Father/Husband name	Complete Address	Contact Numbers	Place of camp	Type of Aid Given	Date of Camp	Whether any surgical correction undertaken	Date of test check	Findings of test check (eg distributed confirmed and working well/distribution confirmed but quality not satisfactory/distribution not confirmed, etc.)
7	60	N. Lalitha Saisuma	F	21	D/o. Venkata Sivakumar	D/o 4-1-77 P. S. P. Road Pondicherry	944160 1931	SSA office Pondicherry	Kit -4	8-5-2023	NO	8-5-2023	Distributed Confirmed and working well
8	75	Sk. Ahmed	M	11	S/o. Nayab Rasool	3-106-1 Kaniyazhi Pondicherry	99854 72725	SSA office Pondicherry	Kit -3	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well
9	85	G. Rakesh Harshavardhan	M	8	S/o. G. Narasimhan	1-83 G. Thirup Sethurambadi Pondicherry	7893726 267	SSA office Pondicherry	Kit -3	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well
10	90	SK. Sarma Basha	M	11	S/o. SK Subh ani	8-5-20 Old office S. Rajawada Pondicherry	984850 8188	SSA office Pondicherry	Kit -3	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well
11	94	K. Lalitha Narashimha	M	14	S/o. Vijayalaksh shini	8-127 S. Rajawada Pondicherry	810565 969	SSA office Pondicherry	Kit -4	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well
12	105	S. Vinay Kumar	M	12	S/o. Narayana	C. S. P. S. Pondicherry	9652098 710	SSA office Pondicherry	Kit -4	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well
13	112	T. Ananya	F	14	D/o. Isak	M. S. S. Pondicherry	9673 4036 92	SSA office Pondicherry	Kit -4	9-5-2023	NO	9-5-2023	Distributed Confirmed and working well

Sl. No.	S.No of List of the covered beneficiaries	Name of Beneficiaries	Gender	Age	Father/ Husband name	Complete Address	Contact Numbers	Place of camp	Type of Aid Given	Date of Camp	Whether any surgical correction undertaken	Date of test check	Findings of test check (eg distributed confirmed and working well/distribution confirmed but quality not satisfactory/distribution not confirmed, etc.)
14	120	J. Venkata Jesanthra	F	7	D/o Srinivas	8-19-66, Gaddala, Brakasa	6309646230	SSA office Brakasa	K3	9-8-2023	No	9-8-2023	Distributed confirmed and working well
15	137	S. Sarami Ransajeddy	M	14	S/o Laxmi jeddy	1-97a, Makkabam, Brakasa	9948897623	SSA office Brakasa	K4	9-8-2023	No	9-8-2023	Distributed confirmed and working well
16	157	E. Venkata Vardhitha	F	9	D/o Venkateswaraiah	1-203-413, Makkabam, Brakasa	8096577170	SSA office Brakasa	K3	9-8-2023	No	9-8-2023	Distributed confirmed and working well
17													
18													
19													
20													

PART - II

ABSTRACT OF TEST CHECK

Total No. of beneficiaries Test checked	No. of beneficiaries found with aid/appliances		No. of beneficiaries not found to have been given aid/appliances
	Working satisfactory	Not working satisfactory	
16	16	0	0

Certified that the above report is based on test check personally carried out by me and the finding have been as follows:

IE COORDINATOR
SAMAGRA SHIKSHA
PRAKASAM DISTRICT, ONGOLE

Doctor of primary Health Centre/Block/Tehsil or Tehsildar of Nayab Tehsildar or SDO or BDO/SDO level officer or Social Welfare Officer/District Disability Officer Women and Child Development Officer holding charge of Social Welfare or any other officer authorised by District Collector
Authorised officer from any other NIs