







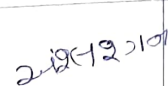




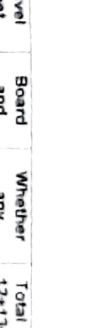

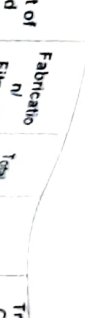

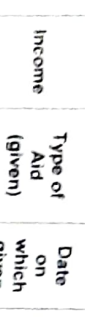



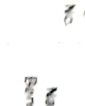
NATIONAL INSTITUTE FOR THE EMPowerMENT OF PERSONS WITH INTELLECTUAL DISABILITIES(DIVYANGJAN), SECUNDERABAD
 Register to be Maintained by the Agencies Implementing the Scheme of Assistance to Disabled for Purchase / fitting of Aids / Appliances

Sl. No.	Name of Beneficiary	Address	MF	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabricate or Purchase Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expense Paid	Whether any surgical/Correction Undertaken	Total of 12-15-16-17	No of Days for which stayed	Signature of Beneficiary (Thumb Impression)	Photo	When did you get accompanied by Escort	Case	When did you last receive aids	When did you last receive aids
1	Shankar Reddy	...	Y	14	22,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
2	N	10	50,000/-	KIT-5	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
3	F	13	22,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
4	M	12	20,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
5	F	13	22,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
6	M	12	20,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
7	F	13	22,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
8	M	12	20,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
9	F	13	22,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-
10	M	12	20,000/-	KIT-3	2/3/2023	-	-	-	-	-	-	-	-	-			...	-	-	-


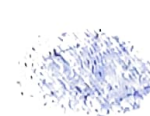



ANNEXURE - III






1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Name of Beneficiary	Address	MF	Age	Income	Type of Aid (Given)	Date on which given	Days of Hospitalization	Fabrication of Documents	Total Cost of Aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any Surgical / Operation Undertaken	Total of 13-17	No. of Days for which stayed	Signature of Beneficiary/Thru	Photo	Where Case is being handled by	Where Case is being handled	Where Case is being handled	
1
2
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9
10

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Name of Beneficiary	Address	Occupation	Age	Sex	Income	Type of Aid (Given)	Date on which given	Qty of Aid	Fabrication n/ Filament Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any surgical/ Correction Undertaken	Total of 12-13+14-15	No of Days for which stayed	Signature of Beneficiary/ Thumb Impression	Photo	When accompanied by Escort	Caste	When did you last receive aids
1																					
2																					
11	Abhishek Lokan Parasuram- Beng	Khatke Pa. Saver Ta. Dhampur Dist. Valad		M	40,000/-	Kil-3	2/3/ 2023	-	-	-	-	-	-	-	-	-			-	-	-
12	Rishabh Jayashilpa	Pulraj Pa. C. P. Ta. Dhampur Dist. Valad		F	22,000/-	Kil-3	2/3/ 2023	-	-	-	-	-	-	-	-	-			5512 Wines	-	-
13	Parash Ekan Aishika	Kalnani Ta. Dhampur Dist. Valad		M	24,000/-	Kil-3	2/3/ 2023	-	-	-	-	-	-	-	-	-			-	-	-
14	Savitika Jayashilpa	gandya Pa. Dhampur Dist. Valad		F	26,000/-	Kil-3	2/3/ 2023	-	-	-	-	-	-	-	-	-			-	-	-
15	Anjali Jayashilpa	Gandya Ta. Dhampur Dist. Valad		F	20,000/-	Kil-3	2/3/ 2023	-	-	-	-	-	-	-	-	-			-	-	-

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	Photo
Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabrication of Fimnet Charges	Total Cost of Aid	Subsidy Provided	Travel Cost Paid to Out Station Beneficiaries	Board and Lodging Expenses Paid	Whether any surgical/Correction Undertaken	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/Thumb Impression		
1. Purnima Bala Saha	Ward No. 2, Panchayat, Durgam Chandi	M	15	25,000/-	Kit-4	2/9/20	-	-	-	-	-	-	-	-	-	-		
2. Purnima Bala Saha	Ward No. 2, Panchayat, Durgam Chandi	M	10	20,000/-	Kit-3	2/3/20	-	-	-	-	-	-	-	-	-	-		
3. Purnima Bala Saha	Ward No. 2, Panchayat, Durgam Chandi	M	10	20,000/-	Kit-3	2/3/20	-	-	-	-	-	-	-	-	-	-		
4. Purnima Bala Saha	Ward No. 2, Panchayat, Durgam Chandi	M	12	20,000/-	Kit-3	2/3/20	-	-	-	-	-	-	-	-	-	-		
5. Purnima Bala Saha	Ward No. 2, Panchayat, Durgam Chandi	M	10	20,000/-	Kit-3	2/3/20	-	-	-	-	-	-	-	-	-	-		

BR

S. No.	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabrication n/ Fitment Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any surgical/ Correction Undertaken	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary Thumb Impressio	
21	Aravindan Peruvu Nellikunholu	Peruvu T. N. Peruvu - cor Peruvu	M	11	25,000	Kit-3	2/3/2023	-	-	-	-	-	-	-	-	-	-	
22	Vaidhathi bhabha	Genathiyu T. Diampur bhabha Peruvu	F	10	28,000	Kit-3	2/3/2023	-	-	-	-	-	-	-	-	-	-	
23	Santhya bhabha	Genathiyu, T. Diampur bhabha Peruvu	M	10	28,000	Kit-3	2/3/2023	-	-	-	-	-	-	-	-	-	-	
24	Santhya bhabha	Peruvu Peruvu. bhabha T. Diampur Peruvu	M	14	28,000	Kit-4	2/3/2023	-	-	-	-	-	-	-	-	-	-	
25	Parvathi bhabha	Peruvu Peruvu Peruvu T. Diampur Peruvu	M	11	24,000	Kit-3	2/3/2023	-	-	-	-	-	-	-	-	-	-	

No.	Name of Beneficiary	Address	MR	Age	Income	Type of Aid (CASH)	Date on which given	Subsistence in Rupees	Total Cost of provision and	Subsidy provided	Total Cost Paid to Expenditure Dept. in Rupees	Board and Local Expenditure Paid	Whether awarded / correction undertaken	Total of 1 to 13	No. of CASH for which allowed	Number of (Rupees) in Rupees	Photo	action taken by Elected	Year
1	Shri. J. K. Sharma	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		...	...
2	Shri. R. S. Singh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		...	...
3	Shri. M. P. Singh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		...	...
4	Shri. K. L. Singh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		...	...
5	Shri. J. K. Singh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		...	...

Signature of the Officer

Signature of the Beneficiary

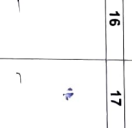
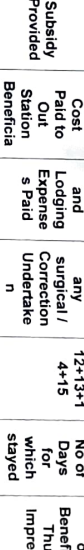
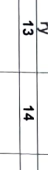
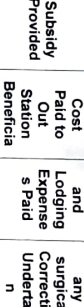

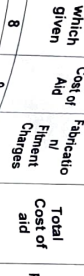



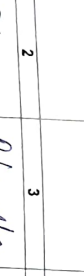
Signature of the Beneficiary

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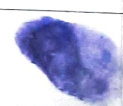



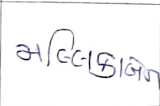

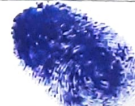



Signature of the Beneficiary

Signature of the Beneficiary

ANNEXURE - III

S. No.	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabrication of Fibre Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any surgical / Correction Undertaken	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary / Thumb Impression	Photo	Whether or 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	Bhavya Kumar	Bheerthan T.V. Dhampan Pur. Dist. Vallabhadra	M	10	23,000/-	Kat-3	2/3/2023	-	-	-	-	-	-	-	-	-			Accompanied	-	-
32	M. Karthika	A. Parvathi T.V. Dhampan Dist. Vallabhadra	M	10	30,000/-	Kat-3	2/3/2023	-	-	-	-	-	-	-	-	-			Accompanied	-	-
33	Nilesh Sai	A. Parvathi T.V. Dhampan Dist. Vallabhadra	M	10	25,000/-	Kat-3	2/3/2023	-	-	-	-	-	-	-	-	-			Accompanied	-	-
34	R. Karthika	A. Gokulnagar Ukhta, T. Dhampan Dist. Vallabhadra	M	11	26,000/-	Kat-3	2/3/2023	-	-	-	-	-	-	-	-	-			Accompanied	-	-
35	R. Karthika	M. S. S. S. S. S. Anganwadi Panaya, Dist. Vallabhadra	F	13	20,000/-	Kat-3	2/3/2023	-	-	-	-	-	-	-	-	-			Accompanied	-	-

ANNEXURE - III

S No	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabricating or fitting charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station	Board and Lodging Expense Paid	Whether any surgical / Correction Undertaken	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/Thumb Impression	Photo	When or accompanied by Escort	Case	When did you last recd aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
36	M. Lakshmi Savitri Kerala	At Puzhazhi T. Dhanuvar Dist. Vellore	M	11	24,000	Kil-3	2/3/2023	-	-	11	-	-	-	-	-	-			-	-	-
32	Vignesh Ajay Kumar	At Kungam T. Dhanuvar Dist. Vellore	M	12	21,000	Kil-3	2/3/2023	-	-	-	-	-	-	-	-	-			-	-	-
38	Mallika Ben Jignesh	Ghodanur V.K. Das T. Dhanuvar Dist. Vellore	F	12	25,000	Kil-3	2/3/2023	-	-	-	-	-	-	-	-	-			-	-	-
39	Hemil Umetha Pateri	Ghodanur T. Dhanuvar Dist. Vellore	F	9	23,000	Kil-3	2/3/2023	-	-	-	-	-	-	-	-	-			-	-	-
40	Nidhin Ken	Ghodanur T. Dhanuvar Dist. Vellore	F	10	27,000	Kil-3	2/3/2023	-	-	-	-	-	-	-	-	-			-	-	-

No	Name of Beneficiary	Address	MR	Age	Income	Type of Aid (Avert)	Date on which given	Cost of Aid	Number of Filing Charges	Total Cost of Aid	Subsidy Provided	Travel Cost Paid to Station Beneficia	Board and Lodging Expense Paid	Whether any surgical / Corporation Undertaken	Total of 12-15-1	No of Days for which stayed	Signature of Beneficiary/ Family Members	Photo	Wholly or in part paid by Escort	When did last visit		
1	At Station		4	6	0	7	0	0	10	11	12	13	14	15	16	17	18			19	20	21
2	At Station		11	11	28,000/-	7	2/3/										18					
3	At Station		11	11	28,000/-	7	2/3/										18					
4	At Station		11	11	28,000/-	7	2/3/										18					
5	At Station		11	11	28,000/-	7	2/3/										18					
6	At Station		11	11	28,000/-	7	2/3/										18					
7	At Station		11	11	28,000/-	7	2/3/										18					
8	At Station		11	11	28,000/-	7	2/3/										18					
9	At Station		11	11	28,000/-	7	2/3/										18					
10	At Station		11	11	28,000/-	7	2/3/										18					

Serial No.	Name of the Candidate	Age	Sex	Religion	Marital Status	Education	Occupation	Address	Signature	When issued	When valid till
1	[Faded Name]	22	M	Hindu	Single	10th	Student	[Faded Address]	[Signature]	10/10/2020	10/10/2021
2	[Faded Name]	20	F	Muslim	Single	12th	Student	[Faded Address]	[Signature]	10/10/2020	10/10/2021
3	[Faded Name]	25	M	Hindu	Married	12th	Teacher	[Faded Address]	[Signature]	10/10/2020	10/10/2021
4	[Faded Name]	23	F	Hindu	Single	10th	Student	[Faded Address]	[Signature]	10/10/2020	10/10/2021
5	[Faded Name]	21	M	Hindu	Single	12th	Student	[Faded Address]	[Signature]	10/10/2020	10/10/2021









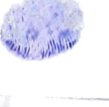








[Handwritten signatures and names corresponding to the candidates in the table above.]

[Faded handwritten text, likely details of the candidates' backgrounds, addresses, and other relevant information.]

Sl. No.	Name of Beneficiary	Address	MR	Age	Income	Type of Aid (SPM)	Date of admission	Cost of Education	Subsidy received	Total Cost of Education	Subsidy provided	Total Cost paid to State	Board and lodging Expenses	Whether any surplus/deficit	Total of (12) to (14)	No. of days for which stipend	Signature of Beneficiary/Parent	Photo	Date	When the account is closed	When the account is opened
1	Mr. [Name]	[Address]	4	5	[Income]	[Type]	[Date]	[Cost]	[Subsidy]	[Total Cost]	[Subsidy]	[Total Cost]	[Board]	[Whether]	[Total]	[Days]	[Signature]	[Photo]	[Date]	[When]	[When]
2	Mr. [Name]	[Address]	4	5	[Income]	[Type]	[Date]	[Cost]	[Subsidy]	[Total Cost]	[Subsidy]	[Total Cost]	[Board]	[Whether]	[Total]	[Days]	[Signature]	[Photo]	[Date]	[When]	[When]
3	Mr. [Name]	[Address]	4	5	[Income]	[Type]	[Date]	[Cost]	[Subsidy]	[Total Cost]	[Subsidy]	[Total Cost]	[Board]	[Whether]	[Total]	[Days]	[Signature]	[Photo]	[Date]	[When]	[When]
4	Mr. [Name]	[Address]	4	5	[Income]	[Type]	[Date]	[Cost]	[Subsidy]	[Total Cost]	[Subsidy]	[Total Cost]	[Board]	[Whether]	[Total]	[Days]	[Signature]	[Photo]	[Date]	[When]	[When]
5	Mr. [Name]	[Address]	4	5	[Income]	[Type]	[Date]	[Cost]	[Subsidy]	[Total Cost]	[Subsidy]	[Total Cost]	[Board]	[Whether]	[Total]	[Days]	[Signature]	[Photo]	[Date]	[When]	[When]

Handwritten notes and signatures at the bottom of the page, including names like 'K. K. K. K. K.' and other illegible text.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Name of Beneficiary	Address	M/F	Age	Income	Aid (given)	On which given	Cost of Aid	Fabrication	Fitment Charges	Total Cost of Aid	Subsidy Provided	Travel Cost Paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any surgical/Correction Undertaken	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/Thumb Impression	Photo	Whether or accompanied by Escort	Case	When did you last received aids
56	K. G. Anand Satyavathi Satyavathi Satyavathi		M	13	24,000/-	K.R. 4	2/3/2023	-	-	-	-	-	-	-	-	-			J.P. Pillai	-	-
57	D. Hanu K. Manoj K. Manoj K. Manoj		M	9	29,000/-	K.R. 3	2/3/2023	-	-	-	-	-	-	-	-	-			Govind H P	-	-
58	R. Lakshmi T. Lakshmi T. Lakshmi T. Lakshmi		F	12	22,000/-	K.R. 1	2/3/2023	-	-	-	-	-	-	-	-	-			Ravi	-	-
59	D. Hanu T. Lakshmi T. Lakshmi T. Lakshmi		F	13	89,000/-	K.R. 4	2/3/2022	-	-	-	-	-	-	-	-	-			Ravi	-	-
60	M. Hanu T. Lakshmi T. Lakshmi T. Lakshmi		M	9	25,000/-	K.R. 3	2/3/2023	-	-	-	-	-	-	-	-	-			M. Hanu	-	-

No.	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (Given)	on which given	Cost of Aid	10) Firmly Charged	11) Cost of Aid	12) Subsidy Provided	13) Travel Cost Paid to Station Beneficiary	14) Board and Lodging Expense Paid	15) Whether any surgical / correction Undertaken	16) Total of 12+13+14+15	17) No. of days for which beneficiary stayed	18) No. of Beneficiary's Therapy / Impairment	Photo
1	Shri. A. Suresh Kumar	...	M	
2	M	
3	M	
4	M	
5	M	



Sanchez



Sanchez



Sanchez



Sanchez








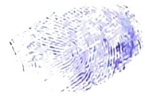





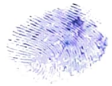



Sanchez



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5	No	Name of Beneficiary	Address	MR	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fees/Charges	Total Cost of Aid	Subsidy provided	Actual Cost paid to Out Station Beneficiary	Grant and Lodging Expenses paid	Whether any surgical / Correction Undertake	12-13-1	14-15	No. of Days for which stayed	16	17	18	19	20	
	1	Shree Ram	...		...	...	...	2/2/2023																
	2	...	...		...	...	...	2/3/2023																
	3	...	...		...	...	...	2/3/2023																
	4	...	...		...	...	...	2/3/2023																
	5	...	...		...	...	...	2/3/2023																

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
S. No.	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabrication / Fitment Charges	Total Cost of aid	Subsidy Provided	Travel Cost paid to Station Beneficiary	Board and Lodging Expenses Paid	Whether any surgical / Correction Undertaken	Total of 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
76	Miskol Bhanai Bhanai	Sugarpads Dakele, Yr. Gramon Dnt. Valad	M	13yr	50,000	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			Miskol	-	-
77	Kerish Kaman Rakalika	Nade Fak's Sutekar Ta Pardi, Dist. Valad	M	18yr	1,30,000	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			Kerish	-	-
78	Bharin Charalika	Narisingur Faliya Dakele Pardi, Valad	M	14yr	1,40,000	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			Bharin	-	-
79	Rakul Karbhari Patis	Zanalen Paliya Ta - Pardi, Dist - Valad	M	16yr	1,30,000	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			Rakul	-	-
80	Kharshaba Budhika	Naroli Paliya Kungam, Dist. Valad	F	17yr	22,000	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			Kharshaba	-	-

No.	Name of Beneficiary	Address	MR	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabricate of Filament Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to station Beneficiary	Board and Lodging Expense Paid	Whether any surgical / Correction Undertake	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/ Thumb Impression	
1	Mr. M. S. ...	...															
2	Mr.																
3	Mr.																
4	Mr.																
5	Mr.																
6	Mr.																
7	Mr.																
8	Mr.																
9	Mr.																
10	Mr.																
11	Mr.																
12	Mr.																
13	Mr.																
14	Mr.																
15	Mr.																
16	Mr.																
17	Mr.																
18	Mr.																



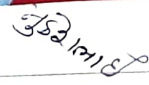















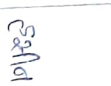

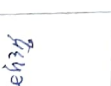

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ANNEXURE - III

S No.	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabrication of Filament Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Station	Board and Lodging Expenses Paid	Whether any surgical / Correction Undertaken	Total of 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	
91	Purnaban Muttanba To Urangan Dw. Vaidal	Chanchipada To Urangan Dw. Vaidal	F	12yr	15,000/-	Kit-4	3/3/ 2023	-	-	-	-	-	-	-	-	-				-	-
92	Kevin Rajivatha Padas Dw. Vaidal	Karkina Falya To. Dabali Dw. Vaidal	M	9yr	14,000/-	Kit-3	3/3/ 2023	-	-	-	-	-	-	-	-	-			Seetha Lakshmi	-	-
93	Uthai Vinnar Muttanba To Vop, Vaidal	Vinnanba Kopari Padas To Vop, Vaidal	M	14yr	80,000/-	Kit-4	3/3/ 2023	-	-	-	-	-	-	-	-	-			V.R. Patel	-	-
94	Ayushi Ranjitha Muttanba Dw. Vaidal	Muttanba Dw. Vaidal	F	11yr	45,000/-	Kit-3	3/3/ 2023	-	-	-	-	-	-	-	-	-				-	-
95	Anitha Dabali To Urangan Dw. Vaidal	Dabali Gruva Padi To Urangan Dw. Vaidal	M	13	25,000/-	Kit-4	3/3/ 2023	-	-	-	-	-	-	-	-	-			Anil	-	-

S. No.	Name of 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 Station Beneficiary	Board and Lodging Expense Paid	Whether any surgical / Correction Undertaken	Total of 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	
87	Harshik Jalsankar	Kalafar Shivajinagar Datta T. Marolpur Dist. Valsad	M	12yrs	48,000/-	Kit-3	3/3/2023	-	-	-	-	-	-	-	-	-			25.12.2022		
88	Jay Patel	Harshik Jalsankar Kalafar Shivajinagar Datta T. Marolpur Dist. Valsad	M	12yrs	1,40,000/-	Kit-3	3/3/2023	-	-	-	-	-	-	-	-	-			25.12.2022		
89	Havina Harshik	Harshik Jalsankar Kalafar Shivajinagar Datta T. Marolpur Dist. Valsad	F	14yrs	85,000/-	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			25.12.2022		
100	Breoklyn Harshik	Harshik Jalsankar Kalafar Shivajinagar Datta T. Marolpur Dist. Valsad	M	14yrs	85,000/-	Kit-4	3/3/2023	-	-	-	-	-	-	-	-	-			25.12.2022		

ANNEXURE - III

S No	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabricatio n/ Fitment Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Out Station Beneficia ry	Board and Lodging Expense s Paid	Whether any surgical/ Correction Undertake n	Total of 12+13+14+15	No of Days for which stayed	Signature of Beneficiary/ Thumb Impression	Photo	Wheth er accom panied by Escort	Caste	When did you last recei ved aids	
1																						
101	Anitha K K	Tripunithura P.O. Valad	M	12yr	15,000/-	KH-3	8/3/2023	-	-	-	-	-	-	-	-	-	ANSHT P parcel		C1210103/11			
102	Shreevatsa Sankar Das	Chakkari T. Changan, P.O. Valad	F	15yr	30,000/-	KH-4	3/3/2023	-	-	-	-	-	-	-	-	-						
103	Raj Shankar Pateri	Panikulal Dapat, P.O. Parakkal, P.O. Valad	M	12yr	13,000/-	KH-3	3/3/2023	-	-	-	-	-	-	-	-	-	2/1/23					
104	Beetidevi Mithadha	Chirathal Chirathal P.O. Parakkal, P.O. Valad	F	14yr	1,35,000/-	KH-4	3/3/2023	-	-	-	-	-	-	-	-	-						
105	Shreevatsa Santosh	Pappi Pappi P.O. Parakkal, P.O. Valad	F	15yr	1,40,000/-	KH-4	8/3/2023	-	-	-	-	-	-	-	-	-						

When did you last received aids

Wheth er accom panied by Escort

Caste

Signature of Beneficiary/ Thumb Impression

No of Days for which stayed

Total of 12+13+14+15

Whether any surgical/ Correction Undertake n

Board and Lodging Expense s Paid

Travel Cost Paid to Out Station Beneficia ry

Subsidy Provided

Total Cost of aid

Fabricatio n/ Fitment Charges

Cost of Aid

Date on which given

Type of Aid (given)

Income







Age

M/F

Address

Name of Beneficiary

S No

5	No	Name of Beneficiary	Address	M/F	Age	Income	Type of Aid (given)	Date on which given	Cost of Aid	Fabricatio n/ Filament Charges	Total Cost of aid	Subsidy Provided	Travel Cost Paid to Beneficia ry	Board and Lodging Expense s Paid	Whether any surgical/ Correction Undertake n	12+13+14+15	No of Days for which stayed	Signature of Beneficiary/ Thumb Impression	Photo	Whether accom panied by Escort	Caste	When did you last recei ved aids
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
		Pravin Nair	Pravin Nair Kandamattom Kandamattom Kandamattom	M	11y	27,000	Kid-3	8/3/2023	-	-	-	-	-	-	-	-	-			Accompanied		
		Arunal K. Kishan	Arunal K. Kishan Kandamattom Kandamattom Kandamattom	M	11y	25,000	Kid-3	8/3/2023	-	-	-	-	-	-	-	-	-			Accompanied		
		Hollan S. S. S. S.	Hollan S. S. S. S. Kandamattom Kandamattom Kandamattom	M	12y	22,000	Kid-3	3/3/2023	-	-	-	-	-	-	-	-	-			Accompanied		