



Saravana Multispeciality Hospital Pvt.Ltd.



MANAGING DIRECTOR :

Dr. P. SARAVANAN MD.,

05.03.2024

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Master Mugundhan 10years /Male is a case of Right below Amputation and Right Fore Foot partial amputation. He is advised for artificial limbs for both the limbs. Total cost of artificial limbs would be Rs 75,000 (Seventy Five Thousand) approximately.

Medical Officer

SARAVANA MULTISPECIALITY
HOSPITAL PVT. LTD.
No.7-A, MANUTHUPANDIYAR NAGAR
FOURTH MAIN ROAD, NARIMEDU
MADURAI-625 002, PH: 2446000, 2446004

05.03.2024

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Master Mugundhan 10years /Male is a case of Right below Amputation and Right Fore Foot partial amputation. He is advised for artificial limbs for both the limbs. Total cost of artificial limbs would be Rs 75,000 (Seventy Five Thousand) approximately.

With Regards

Project Co-Ordinator

QUATOATION

FROM,

UNITY GAIT PROSTHETICS & ORTHOTICS

NO:386, SLC 2nd type, LIG colony, Anna Nagar, Madurai 625020

GST NO: 33BCQPN3016C1ZY

TO, MUGUNTHAN SURIYA TRUST SARAVANA HOSPITAL MADURAI 625020

RECEIPT NO:

PRODUCT NAME	QTY		AMOUNT
Right BK Prosthesis with SACH feet, laminated socket, foam cover and cosmetic socks.	2	;	71,250
Left Partial Foot Prosthesis			
			=
		GST5%	3,750
		TOTAL AMOUNT	75000.00

(RUPEES: SEVENTY FIVE THOUSAND ONLY).

Bank Name: HDFC Bank

A/C Name: UNITY GAIT PROSTHETICS AND ORTHOTICS

Branch : KK Nagar, Madurai A/C Name: 50200087046190 IFSC Code: HDFC0002615





Government of India

Unique Identification Authority of India

பதிவேட்டு என்/ Enrolment No.: 2192/50226/50596

To
G (LYCS)SSST
P Mugunthan
C/O: Premkumar
6/98
KAJA STREET
SOUTH VELI STREET
Madurai
Madurai Tamil Nadu - 625001
9842140088

Signature valid



உங்கள் ஆதார் எண் / Your Aadhaar No. :

3577 6450 5239 VID: 9114 2168 5737 5606

எனது ஆதார். எனது அடையாளம்



Government of India



ssue Date: 21/04/2021



பி முகுந்தன் P Mugunthan பிறந்த நாள்/DOB: 30/07/2013 ஆண்/ MALE

3577 6450 5239 VID: 9114 2168 5737 5606

எனது ஆகார்





இந்திய அரசாங்கம் Unique Identification Authority of India Government of India

படுவு அடையாளம்/Enrollment No.: 2192/50226/42690

Kaleeswari P សារាម៉ាល់ល្អៀ រៀ W/O: Premkumar 6/9B KAJA STREET SOUTH VELI STREET Madurai Madurai, Madurai South, Madurai, Tamil Nadu - 625001 8148280745



22460506



உங்கள் ஆதார் எண் / Your Aadhaar No. :

6126 1009 2731

எனது ஆதார், எனது அடையாளம்



இந்திய அரசாங்கம்

Government of India

காளீஸ்வரி பி Kaleeswari P



பிறந்த நாள் / DOB: 04/02/1993

பெண்பால் / Female

6126 1009 2731



எனது ஆதார், எனது அடையாளம்

Form-VI

Certificate of Disability

(In cases of multiple disabilities)

[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Dr. G.K. SCINDIA, MBBS., MD[PMR]., Reg No : 101700 Assistant Professor Dept of Physical Medicine and Rehabilitation Madural Medical Conege & Gort Rajaji Hospital, Madural - 20

			-	Reg No 1	rofessor militation
	7161.371		Date: Dept 0	Physic Medical Concess	& Gov Rotal Hospital
This is to ce	rtify that I have carefu	tly examined Shri/Sn	THE REAL PROPERTY.		
MUGUN	son/wife/daug	hter of Shri	romicu	mas	Date of Birth
	-2 14) mala/fam	ala		
100 CT - 100 CT		parmanent resident o	House No.	3	Ward/Village/
istration No	relimprogi P	Valgers Ava	1 - UMPE	Sam V	adurai
et [7,2],114	1 A A ION OUT	USI Office ITHEE	d am application	lhat:	
	Whose photograph of Multiple Disability	Hallen autont of por	centage physic	ial impairme	nt/disability has
The second secon	a man avidalianci	di lu siko onk ranmiin	SUE OF DIE GUID	CHILL	pecified) for the
disabilities ticked	below and is shown ag	ainst the relevant dis	ability in the ta	bie below.	
	Disability	Affected part of body	Diagno		Permanent physical impairment/ ental disability (in %)
Locomotor disa	shilitu	@	(R) she	ulder	, 90-1
		dri	mti en	latron	(WIN)
Muscular Dystr	opiny	(D) Th	une to be	النا	
Leprosy cured		an	mutal	ani /1	0
Dwarfism		No.	ne cost	aurton	talian
Cerebral Palsy		1			
Acid attack Victi	m				
Low vision		#			
Blindness		#			
Deaf	3	£			
Hard of Hearing	7.7	2			
Speech and Lan	guage Disability				

0-5--6,00,000 Cps. 20-8-2018--HCL-10

அன்பார்ந்த நன்கொடையாளர்களே:

ஏழை குடும்பத்தைச் சார்ந்த சிறுவன் (முகுந்தன். P) மற்றும் அவரது குடும்பத்தாரின் முழு விவரங்கள் தங்கள் கவனத்திற்கு,

தங்களது நன்கொடை இவரது நல்வாழ்வுக்கு உதவும், தற்போது இவருக்கு 10 வயது ஆகிறது.

6 மாதங்களுக்கு முன்பு இவருக்கு வீட்டில் மின்சார விபத்து ஏற்பட்டு தனது இரண்டு கால்களையும் இழந்து விட்டார், உடனடியாக மதுரை அரசு மருத்துவமனையில் சிகிச்சை மேற்கொண்டனர் வலது காலில் முழங்காலுக்கு கீழே மருத்துவர்கள் எடுத்து விட்டார்கள். இடது காலில் பாதத்தை எடுத்து விட்டார்கள்.

இவரது அப்பா டிரைவர் வேலை செய்து வருகிறார்.போதுமான வருமானம் இல்லாததால் தரமான செயற்கை கால் வாங்குவதற்கு இவர்களிடம் போதிய வருமானம் இல்லை,

.மேலும் தங்களது உதவித்தொகைக்கு $80\mathrm{G}$ பிரிவின் கீழ் வருமான வரிப்பயன் கிடைக்கும்.

For Transferring the Donation to the Account is:

SURYA TRUST, HDFC BANK A/C NO: 50100196115040, Tallakulam branch, Madurai, (IFSC NO: HDFC0004691), Saving Account,

Surya Trust is a Unit of Saravana Multispeciality Hospital,

For Sending the Donation to the Address is:

Surya Trust, No 350 / W 6, Paarai Road, Saruthupatti, Theni To Periyakulam Main Road, 625523, Theni Distirct, Contact No: 89 7333 7222, 84 2876 6343,

(Cheque Name: Surya Trust) (DD Name: Surya Trust (Payable At Theni)

With Regards,
Chandra. R
Surya Trust, Saravana Hospital, Madurai,
89 7333 7222, (84 2876 6343, G Pay & Phone Pay No:)

Dear Donor,

Please find the Poor Boy (Mugunthan. P) full details along with his family details,

Your donation will make life for this Poor Patient (Mugunthan. P) He is 10 year old boy,

6 months ago he had an electrical accident at home and lost both his legs, He was immediately treated at the Madurai Government Hospital, The doctors removed the right leg below the knee, Left leg amputated

His father works as a driver and they do not have enough income to buy a quality artificial leg due to insufficient income.,

You will also get tax benefit under 80G section for your donation, the Particular family members of the Poor Patient (Mugunthan. P) will be so thankful to you forever,

For Transferring the Donation to the Account is:

SURYA TRUST, HDFC BANK A/C NO: 50100196115040, Tallakulam branch, Madurai, (IFSC NO: HDFC0004691), Saving Account,

Surya Trust is a unit of Saravana Multispeciality Hospital,

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(Cheque Name: Surya Trust) (DD Name: Surya Trust (Payable At Theni)

With Regards,
Chandra. R
Surya Trust, Saravana Hospital, Madurai,
89 7333 7222, (84 2876 6343, G Pay & Phone Pay No:)

We have successfully completed surgery for 518 poor patients with the free of cost as of now

Kindly help us every month so that we can do free surgery's for poor child for 3 member in a month

It is all because of donors like you, once again we thanking you for your support,

The particular poor patient of the family members will be so thankful to you forever,

With Regards

Surya Trust

Saravana Multispeciality Hospital Pvt Ltd, Narimedu, Madurai - 625002

Contact: 89 7333 7222, 84 2876 6343,

saravanahospital222@gmail.com

www.saravanahospital.org