

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

Register to be Maintained by the Agencies Implementing the Scheme of Assistance to Disabled for Purchase / Fitting of Aids/Appliances

ANNEXURE - II

| Sl. No | Name of the Beneficiary | Address | Sex | Age | Income | Type of Aid Given | Date on which Given | Cost of Aid | Remarks on the Present Charges | Total Cost of Aid | Subsidy Provided | Total cost paid to the issuing Agency | Amount and Ledger No. entered in Recd. | Whether Any Surgical Operation Undertaken | Total (2+13+14+15) | Name of Dept for which issued | Signature of Beneficiary/Trustee/Institution | Signature Accompanied by Father | Category | 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 | AMAL RAJ S/o Mary 9526491813 | NARI KUNNEL, 19/368 EDAVAKA, VALERY MANJANTHAVADY WAYANAD KERALA-670645 AD.No. 4975 0371 6205 | M | 16 | P.A. Rs. 2000 only | TLM KIT (4) | 30-3-22 | | | | | | | | |  |  | UV | GEN | NOT YET Recd. |
| 12 | ANGELIKA B/o RAJ 9526491813 | VAZHAKALAYIL, KOYALERY, CHEERUKATTUR PANAMARAM MANJANTHAVADY WAYANAD KERALA - 670721 AD.No. 6492 7574 4621 | F | 11 | P.A. Rs. 6500 only | TLM KIT (3) | 30-3-22 | | | | | | | | |  |  | | GEN | NOT YET Recd. |
| 13 | ARUN V.J S/o Jayanand 9526491813 | IDUKUNJ, 208, VALERY EDAVAKA MANJANTHAVADY WAYANAD KERALA-670645 AD.No. 3575 2255 372 | M | 25 | P.A. Rs. 5000 only | TLM KIT (4) | 30-3-22 | | | | | | | | |  |  | M.K.S | GEN | NOT YET Recd. |
| 14 | ATHUL.H.P S/o Papa 9526491813 | MUNDUNADAKKAL HOUSE KUNNAMANGALAM (P) NALLORMADU MANJANTHAVADY (M) WAYANAD (D) KERALA-670645 AD.No. 6060 5275 2287 | M | 14 | P.A. Rs. 5000 only | TLM KIT (4) | 30-3-22 | | | | | | | | |  |  | | GEN | NOT YET Recd. |
| 15 | Augustin S/o Francis 9526491813 | ALANAL, 19/397, EDAVAKA, VALERY MANJANTHAVADY WAYANAD KERALA-670645 AD.No. 7465 2906 3364 | M | 15 | P.A. Rs. 2000 only | TLM KIT (4) | 30-3-22 | | | | | | | | |  |  | Quinta | GEN | NOT YET Recd. |

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 | MF | Age | Income | Type of Aid (given) | Date on which Given | Cost of Aid | Fabrication of Implant Charges | Total Cost of Aid | Subsidy Provided | Travel cost paid to out station Beneficiary | Board and Lodging expenses on field | Whether Any Surgical Correction Undertaken | Total I2+I3+I4+I5 | No. of Days for which stayed | Signature of Beneficiary Thumb Impression | Whether Accompanied By Escort | Case | 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 |
| 36 | EDWIN S. S/O THOMAS SHINTO CHAKO 9447111351 | MARANGATTIL ALATTIL (M) MANANTHAVADY WAYANAD KERALA - 670644 AID NO: T838 6870 0235 | M | 9 | P.A. Rs. 42,000 only | TLM KIT (3) | 31-3-22 | | | | | | | | | |  |  | GEN Amey | NOT YET Received. |
| 37 | HARITHA S/O THOMAS 9539816004 | ELLUMANNAM(V) COAVAKA (P) MANANTHAVADY(B) WAYANAD(D) KERALA - 670645 AID NO: 9162 1534 6163 | F | 15 | P.A. Rs. 60,000 only. | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | GEN Ramesh | NOT YET Received. |
| 38 | JAWED S/O HABEB 9961291469 | CHOOKRAN VELLITAADI THETTIMALA(P) MANANTHAVADY(T) WAYANAD(D) KERALA - 670731 AID NO: 2920 6001 0476. | M | 13 | P.A. Rs. 60,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | OBC Mithun | NOT YET Received. |
| 39 | JUSTIN S/O STEPHEN 833007458 | UPPUPADANNA(V) PAYYAVOOR(LM) THALI PASOOPA(T) KANNUR(D) KERALA - 670633 AID NO: 4593 9126 5709 | M | 18 | P.A. Rs. 48,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | GEN Raj | NOT YET Received. |
| 40 | JITHU S/O PRASAD 9496341936 | PUNATHI L VEDU(V) MANANTHAVADY(T) WAYANAD(D) KERALA - 670645 AID NO: 8130 7114 8721 | M | 25 | P.A. Rs. 60,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | OBC Bharath | NOT YET Received. |

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 Assistance to Disabled for Purchase / Fitting of Aids/Appliances

ANNEXURE - III

| Sl. NO | Name of the Beneficiary | Address | MF | Age | Income | Type of Aid (given) | Date on which Given | Cost of Aid | Fabrication or Fitting Charge | 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 | 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 |
| 16 | SOYA CUS % Siji | VANJIDED KANJIRANGAD MANANTHAVADI WAYANAD KERALA-670731 PIN NO- 4574 7800 0553 | F | 11 | P.A. Rs. 45,000/- only | TLM KIT (3) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received |
| 17 | SGORAJ % SURESH | CHOLAPPURATH POTTUKVAL MANANTHAVADI WAYANAD KERALA-670644 PIN NO- 4242 8562 3186 | M | 18 | P.A. Rs. 45,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received |
| 18 | SUJAY % SURESH | NADAVAYAL CHEENGOBE MANANTHAVADI WAYANAD KERALA-670731 PIN NO- 7355 2423 2299 | M | 24 | P.A. Rs. 40,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received |
| 19 | SAVIO % JOSE | PAOINNHARATHARA VAITHIRI MANANTHAVADI WAYANAD KERALA-670645 PIN NO- 2201 5131 6023 | M | 18 | P.A. Rs. 50,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received |
| 20 | SHAHANA PARAVEN % ABUBAKAR | KEEDARATTO KAYAKUNNU NADAVAYAL WAYANAD KERALA-670731 PIN NO- 9149 5241 7175 | F | 24 | P.A. Rs. 50,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | | |  |  | ORE | NOT YET Received |

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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 | Fabrication or repair Charges | Total Cost of Aid | Supply Provided | Travel cost paid to out station Beneficiary | Board and Lodging expenses at Place | Whether Any Surgical Correction Undertaken | Total (2+12+14+15) | No. of Days for which stayed | Signature of Beneficiary/Thumb Impression | 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 |
| 1 | JOSEPH T.P S/o PHILIP 9447904148 | KHADICENTRE ETTUKUDUKA KARIVELLUR KANUR KERALA-670521 A.No 763539401203 | M | 25 | P.A. R. 47,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received |
| 2 | JOIS H S/o SANTHOSH 9142884359 | Ponthekeel House 3174 Thamalassey Khozhibode Kerala-673604 A.No 309301515984928 | M | 18 | P.A. R. 24,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received |
| 3 | MUHAMADU SAYAN S/o SHAJAHAN 9544564235 | PANAMARAM MANANTHAVADY WAYANAD KERALA-670721 A.No 260779958938 | M | 15 | P.A. R. 36,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received |
| 4 | MUHAMADU NASIF M S/o Muhamadali 9847482957 | KUPPADITHARA MANANTHAVADY WAYANAD KERALA-670645 A.No 772313661096 | M | 11 | P.A. R. 48,000/- only | TLM KIT (3) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received |
| 5 | MUHAMADU NIYAS S/o HARIS 9796201987 | DWARAKA NALLOORNAD EDAWAKA MANANTHAVADY WAYANAD KERALA-670645 A.No 831324752028 | M | 15 | P.A. R. 60,000/- only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received |

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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 | 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 | 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 |
| 21 | SANJAY S/O SAJESH 9746963582 | CHEMBILODE EDAVAKA MANANTHAVADY WAYANAD KERALA - 670645 ADNOF 983367276217 | M | 14 | | TLM KIT ④ | 31-3-22 | | | | | | | | |  |  | See | Gen | NOT YET Received. |
| 22 | TILLO THOMAS 8606199773 | ANITHOTTATHIL PARAMBA - KASARAGOD KERALA - 671534 ADNOF 458759610200 | M | 19 | P.O. Disrupt only | TLM KIT ④ | 31-3-22 | | | | | | | | |  |  | L.S. S/O | Gen | NOT YET Received. |
| 23 | AMUNA B/O Rathakrishnan 9539028161 | CHOLAKUNDILLY NALLURNAD (D) MANANTHAVADY (D) WAYANAD (D) KERALA - 670645 ADNOF 379474209183 | F | 22 | P.O. Disrupt only | TLM KIT ④ | 31-3-22 | | | | | | | | |  |  | Bridha | OBC | NOT YET Received. |
| 24 | ASITH B Vasantha 9947128683 | MAKKOLA, O2/12 TEMP, VARAYAL KAPPATTOMALA MANANTHAVADY WAYANAD KERALA - 670644 ADNOF 894033724267 | M | 18 | P.O. Disrupt only | TLM KIT ④ | 31-3-22 | | | | | | | | |  |  | B | ST | NOT YET Received. |
| 25 | ASWATHY B Vasantha 9947128683 | MAKKOLA, O2/12 TEMP, VARAYAL KAPPATTOMALA MANANTHAVADY WAYANAD KERALA - 670644 ADNOF 264536799804 | F | 16 | P.O. Disrupt only | TLM KIT ④ | 31-3-22 | | | | | | | | |  |  | | ST | NOT YET Received. |

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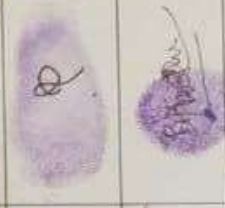






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ANNEXURE - III

| SL NO | Name of the Beneficiary | Address | M/F | Age | Income | Type of Aid (given) | Date on which Given | Cost of Aid | Fabrication or Repair Charge | Total Cost of Aid | Subsidy Provided | Travel cost paid to out station Beneficiary | Board and lodging expenses Paid | Whether Any Surgical Correction Undertaken | Total 12+13+14+15 | No. of Days for which stayed | Signature of Beneficiary Thumb Impression | 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 |
| 31 | Muhammed YASIN s/o Musthafa 9895232030 | NANDARAYAL (V) SULTHAN KATHEDI (P) WAYANAD (D) MANANTHAVADY (T) KERALA - 670721. MADHUR 4290 5078 8717 | M | 16 | P.A. Rs. 36,000 only | TLM KIT (+) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received. |
| 32 | MUHAMMAD FASIL K.E s/o Ibrahim 9544006171 | KALATHIL (P) ECHICHOME (M) MANANTHAVADY (T) WAYANAD (D) KERALA - 670645 MADHUR 6002 7071 0664 | M | 16 | P.A. Rs. 48,000 only | TLM KIT (+) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received. |
| 33 | NIVIN S.O s/o Joy 9747819369 | SOORYAM KOZHITIL (V) KOTTUTUMUGAM (P) KANNUK (D) KERALA - 670631. MADHUR 6721 3414 1420 | M | 21 | P.A. Rs. 64,000 only | TLM KIT (+) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received. |
| 34 | SIBIN K.O s/o Chacko 9744395879 | KOTTUKARA HOUSE NALLURNAO (P) MANANTHAVADY (T) WAYANAD (D) KERALA - 670645 MADHUR 3821 2143 5066 | M | 20 | P.A. Rs. 54,000 only | TLM KIT (+) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received. |
| 35 | SOBIN Siji s/o Sji 9947174728 | CHERUKUNWEL (D) VELLAMUNDA (P) MANANTHAVADY (T) WAYANAD (D) KERALA - 670731 MADHUR 2806 2130 0547 | M | 14 | P.A. Rs. 48,000 only | TLM KIT (+) | 31-3-22 | | | | | | | | | |  |  | GEN | NOT YET Received. |

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ANNEXURE - III

| Sl. No | Name of the Beneficiary | Address | HT | Age | Income | Type of Aid (Given) | Date on which Given | Cost of Aid | Exemption in any respect Charges | Total Cost of Aid | Subsidy provided | Travel cost paid to out-station Beneficiary | Food and Lodging expenses in Aid | Whether Any Surgical Correction Undertaken | Total 12+13+14+15 | No. of Days for which stayed | Signature of Beneficiary Thumb Impression | 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 |
| 16 | AKHIL V J S/o JINESH 9526491813 | VARA PPOANIL TURUVANGA KAYANAD KERALA - 670545 Address 4332 5027 0414 | M | 15 | PA No report only | TLM KIT (4) | 31-05-22 | | | | | | | | |  |  | GEN | Not yet received | |
| 17 | ALBERT BIJU Biju 9447111351 | VELAPACHAL EDAVARANBA KAYANAD KERALA - 670512 Address 5261 0459 9434 | M | 16 | PA No report only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  | GEN | Not yet received | |
| 18 | AKSHY S/o WILSONS 9526491813 | PARACHAL, 406, EDAVARANBA MANANTHAVADY KAYANAD KERALA - 670721 Address 6478 0882 8678 | M | 9 | PA No report only | TLM KIT (3) | 31-03-22 | | | | | | | | |  |  | GEN | Not yet received | |
| 19 | ALBY S/o THOMAS 9447111351 | EMBOLE VILLAGE School for Mentally Retarded THONICHAL, MANANTHAVADY KAYANAD KERALA - 670645 Address 4734 7441 9106 | M | 11 | PA No report only | TLM KIT (3) | 31-3-22 | | | | | | | | |  |  | GEN | Not yet received | |
| 20 | ALAN S/o HERIYAN 9526491813 | KOTTAYIL, 10/47, KALLODY EDAVARA, MANANTHAVADY KAYANAD KERALA - 670645 Address 9932 2423 0198 | M | 16 | PA No report only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  | GEN | Not yet received | |

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ANNEXURE - III

| Sl. No | Name of the Beneficiary | Address | M/F | Age | Income | Type of Aid (given) | Date (in 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 & other expenses paid | Whether Any Surgical Correction Undertaken | Total 12+13+14+15 | No. of Days for which stayed | Signature of Beneficiary Thumb Impression | 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 |
| 41 | AJAY V. S/O RAKHU 8078976570 | CHAMADATH DAWARANGI (P) NALLORKNAD (V) MANANTHAPADY (M) WAYANAD (D) KERALA - 670645 M. No. 5623 4758 6297 | M | 23 | P.A. Rs. 60,000 only | TLM KIT (4) | 31-03-22 | | | | | | | | |  |  |  | GEN | NOT YET Received |
| 42 | BASIL S/O ALIAS 9447909448 | KEEPANASSERY (V) KUNNAMANGALAM (M) WAYANAD (D) KERALA - 670645 M. No. 4517 4748 3905 | M | 16 | P.A. Rs. 50,000 only | TLM KIT (4) | 31-03-22 | | | | | | | | |  |  |  | GEN | NOT YET Received. |
| 43 | BLEBIN S/O ROY 8078976570 | THUMBAKKAKUZHI (P) THARUVANA (V) WAYANAD (D) KERALA - 670645 M. No. 6694 0799 1382 | M | 4 | P.A. Rs. 40,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | GEN | NOT YET Received. |
| 44 | BLESSON S/O ROY 9447111351 | THUMBAKKAKUZHI (P) THARUVANA (V) WAYANAD (D) KERALA - 670645 M. No. 6003 7258 3055 | M | 17 | P.A. Rs. 50,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | GEN | NOT YET Received. |
| 45 | DIYA S/O THOMAS 9447904148 | MANJODKA (P) PADINJAKATARA (V) WAYANAD (D) KERALA - 673535 M. No. 2255 5506 0653 | M | 13 | P.A. Rs. 70,000 only | TLM KIT (4) | 31-3-22 | | | | | | | | |  |  |  | Gen | Not yet received. |

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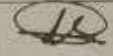



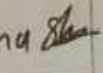

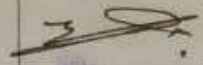








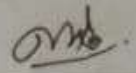
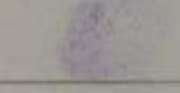
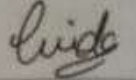
ANNEXURE - III

| Sl NO | Name of the Beneficiary | Address | MF | Age | Income | Type of Aid (given) | Date on which Given | Cost of Aid | Fabricator or/ Fitter/ Charger | Total Cost of Aid | Subsidy Provided | Travel cost paid to out station Beneficiary | Board and Lodging expenses paid | Whether Any Surgical Correction Undertaken | Total 12+13+14+15 | No. of Days for which stayed | Signature of Beneficiary/ Thumb Impression | 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 |
| 46 | ABHY V.J S/o Joseph 9842793180 | VETTU PURAMIAN CHETTAYAMPURAM (M) KANUNUR (D) KERALA - 670674. | M | 22 | P.A. Rs. 4000/- only | TCA KIT (4) | 31-3-22 | | | | | | | | |  |  | <i>Abhy</i> | GEN | Not yet received |
| 47 | ALBIN JOSEPH S/o JOSEPH 9747178160 | ANNIMAL HOUSE 250, MANDAYAL (T) WAYANAD (D) KERALA - 670721. | M | 24 | P.A. Rs. 4000/- only | TCA KIT (4) | 31-3-22 | | | | | | | | |  |  | <i>Albin</i> | GEN | NOT YET received |
| 48 | ABEL SHIBI S/o SHIBI 8881353815 | THARIYODE, PALAKKAL (M) WAYANAD (D) KERALA - 673575 | M | 8 | P.A. Rs. 4000/- only | TCA KIT (3) | 31-3-22 | | | | | | | | |  |  | <i>Shibi</i> | GEN | Not yet received |
| 49 | DEL NA MARIYA SHYJU P/o SHYJUMIX 9400025849. | MADATHUMPADI HOUSE NAL COORAD (M) MAJANTHA VADY (T) WAYANAD (D) KERALA - 670645 | F | 17 | P.A. Rs. 5000/- only | TCA KIT (3) | 31-03-22 | | | | | | | | |  |  | <i>Shyju</i> | GEN | NOT YET received |

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
TLM Kit Distribution Program Registration

Venue:




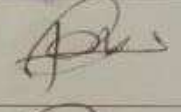

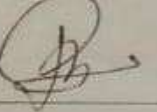



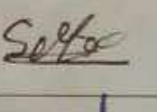



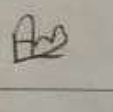



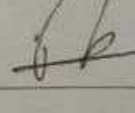

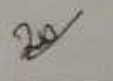
Date: 31-03-2022

| S. No. | Name of the Beneficiary | Age | Gender (M/F) | Category (SC/ST/OBC/Gen) | Address | Accompanier Name | Mobile Number | Beneficiary Signature | Accompanier Signature |
|--------|-------------------------|-----|--------------|--------------------------|---|------------------|---------------|---|--|
| 01. | Akhil. V. J | 15 | M | Gen | thaluvana, wayanad. | Bijujineesh | 9526491813 |  |  |
| 02. | ALBERT BITU | 16 | M | Gen | Bedovalamba Kannur | Biju | 9447111351 |  |  |
| 03. | ALBY THOMAS | 11 | M | Gen | Emmanuelvill, Thonichal, wayanad. | Thomas. | 9447111351 |  | shiny senu  |
| 04. | ALAN CHERIYAN | 16 | M | Gen | Edavaka, Mananthavady wayanad. | cheriyan | 9526491813 |  |  |
| 05. | AKSHY NILSON | 9 | M | Gen | Eachoane, wayanad. | wilkou | 9526491813 |  |  |
| 06. | ANAL RAJ | 16 | M | Gen | Edvaka Mananthavady wayanad. | mary | 9526491813 |  |  |
| 07. | ANGELINA | 11 | F | Gen | cherukattur Mananthavady | Raj. | 9526491813 |  |  |
| 08. | ARUN. V. J | 25 | M | Gen | Edavaka mananthavady | Jayanand. | 9526491813 |  | M.K.K |
| 09. | ATHUL. M. P | 14 | M | Gen | Nalkolnada Thonichal wayanad. | Paul. M. T. | 9526491813 |  |  |
| 10. | AUGUSTINE | 15 | M | Gen | Edavaka Mananthavady wayanad. | Francis | 9526491813 |  |  |

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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|--------|-------------------------|-----|--------------|--------------------------|---------------------------------|------------------|---------------|---|---|
| 21. | JOSEPH T.P | 25 | M | Gen | Karivellur, Kanuru | T.P. Philip. | 9633480706 |  |  |
| 22. | JOISHI. | 18 | M | Gen | Thammasalkey, Khogikhode | Santhosh-p.R. | 9142884359 |  |  |
| 23. | MOHAMMAD SANAN | 15 | M | Gen | Mananthavady wayanad. | Subaida.k. | 9544564335 |  |  |
| 24. | MOHAMMAD NASIF | 11 | M | Gen | Mananthavady wayanad. | Muhammed Ali | 9847482957 |  |  |
| 25. | MOHAMMAD NIYAS | 15 | M | Gen | Mananthavady wayanad. | Habis. | 9746201989 |  |  |
| 26. | MOHAMMAD YASIN | 16 | M | Gen | Sulthan Kethack Mananthavady | Mustafa | 9895232030 |  |  |
| 27. | MOHAMMAD FASIL.K.E | 16 | M | Gen | Kalathur. Mananthavady | Ebrahim | 9544006171 |  |  |
| 28. | NIVIN S.J. | 21 | M | Gen | Kothuthengam Kannur. | Joy. | 9747819367 |  |  |
| 29. | SIBIN.K.C | 20 | M | Gen | Nalloorad. wayanad | Cherko | 9744395897 |  |  |
| 30 | SOBIN.SIJT | 14 | M | Gen | cheerunnell. Mananthavady. | Siju | 994774728 |  |  |

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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|--------|-------------------------|-----|--------------|--------------------------|--------------------------------|------------------|---------------|-----------------------|-----------------------|
| 11. | AJAY V. | 23 | M | Gen | Nallamad Mananthorady | Rabhu | 8078976570 | | |
| 12. | BASIL | 16 | M | Gen | Kunnampalam wayanad. | Abhis | 9447904148 | | |
| 13. | BLEBIN | 14 | M | Gen | Thaluvana wayanad. | Roy | 8078976570 | | |
| 14. | BLESSIN | 17 | M | Gen | Thaluvana wayanad. | Roy | 8078976570 | | |
| 15. | DIYA | 13 | M | Gen | Padinaharatharu wayanad. | Thomas | 9447904148 | | |
| 16. | EDWIN S. | 09 | M | Gen | Attil Mananthorady | Thomas | 944711357 | | |
| 17. | HARITHA | 15 | F | Gen | Edavaka Mananthorady | Thomas | 9538216004 | | |
| 18. | JAVED | 13 | M | OBC | Thettimala Mananthorady | Harshab | 9761291464 | | |
| 19. | JUSTIN | 18 | M | Gen | Payyavoor Kannur. | Stephen | 8330074585 | | |
| 20. | JITHU | 25 | M | OBC | punathil Veedu Mananthorady | Prasad | 949634198 | | |

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

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|--------|-------------------------|-----|--------------|--------------------------|---|------------------|---------------|-----------------------|-----------------------|
| 31. | SOYA-C-S. | 11 | F. | Gen | Kanjirangad Mananthavady way road. | Soji. C.S. | 9947124728 | | |
| 32. | SOORAJ | 18 | M | Gen | Pothuval, Mananthavady way road. | Suresh | 9497652443 | | |
| 33. | SUJAY | 24 | M | Gen | Nadavayal, Mananthavady way road. | Suresh | 9961282718 | | |
| 34. | SAYID | 18 | M | Gen | Vaithiri, Mananthavady | Jose. T | 9495368340 | | |
| 35. | SHAHANA- PARAVI | 24 | F | OBC | keedakattu way road. | Abubakar. | 9495574902 | | |
| 36. | SANTAY | 14 | M | Gen | Chembikode, Mananthavady | Sajeesh | 9746963582 | | |
| 37. | TIJU | 19 | M | Gen | Palanaba Kasaragod | Thomas | 8606199773 | | |
| 38. | YAMUNA. | 22 | F | OBC | Nalloorad, Mananthavady | Rathna | 9539028161 | | |
| 39. | AJITH-B. | 18 | M | ST | Koppattumala Mananthavady | Vasanthan | 9947128683 | | |
| 40. | ARWATHY-B | 16 | F. | ST | Koppattumala Mananthavady | Vasanthan | 9947128683 | | |

FORMAT OF TEST - CHECK REPORT Under ADIP Scheme

Test Check (Minimum of 10/15 percent%) of beneficiaries assisted during the year 2021-22

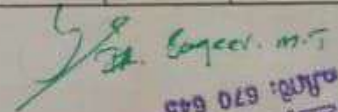
Name of the Implementing Agency : NIEPID, Secunderabad

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 confirmed 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 |
| | | ALBERT BIJU | M | 16 | BIJU AKKHAM | THONICHAL MANASTHANADY | 95264 91813 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory. |
| | | AMAL RAG | M | 16 | MARY | THONICHAL | 9447111 351 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |
| | | BLEBBIN ROY | M | 13 | ROY | THONICHAL | 807897 6570 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |
| | | JOSEPH TP | M | 24 | PHILIP | THONICHAL | 944790 4148 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |
| | | Muhammed Yasin | M | 15 | MUSTAFAK | THONICHAL | 989529 2030 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |
| | | Sujay Suresh | M | 22 | Suresh | THONICHAL | 965691 0782 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |
| | | Ajith B | M | 17 | Vasanth | THONICHAL | 623573 0774 | THONICHAL WAYNAD | ILM KIT (H) | 31-03- 2022 | - | 31-03-22 | Satisfactory |

* 15% in case of grants-in-aid up to Rs.10.00 lakh and 10% in case of grant- in aid exceeding Rs.10.00 lakh




 (Signature:)
 Doctor of primary Health Centre/Block/Tehsil or Tehsildar or 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

National Institute for The Empowerment of Persons with Intellectual Disabilities, (Divyangjan) Secunderabad
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|--------|-------------------------|-----|--------------|--------------------------|--------------------------|------------------|---------------|-----------------------|-----------------------|
| A1. | NIVED. S. | 11 | M | SC | makkiyad. Kannur | Anil kumar | 9656506708 | | |
| A2 | SHIBIN | 16 | M | Gen | Thaliparamba Kannur. | Stephen | 91288 25954 | | |
| A3. | ISSAC | 22 | M | Gen | enनावilla Thonichal. | Sebastian | 965615295 | | |
| A4 | EBIN | 16 | M | Gen | wayanad. Nadarayal. | Joseph.v. | 9247178160 | | |
| A5. | ARUN JONKE | 20 | M | Gen | Edapaddi Kannur | Jole | 9497524642 | | |
| A6. | ABHI V.J | 22 | M | Gen | vettupurambur Kannur. | Joseph.V.J | 9847793180 | | |
| A7. | ALBIN JOSEPH | 24 | M | Gen | Nandayal Wayanad | Joseph. | 9747178160 | | |
| A8. | ABEL SHIKI | 08 | M | Gen | Palakkal Wayanad. | Shijui | 8281353815 | | |
| A9. | DELNAMARIYA SHYJU | 12 | F | Gen | Wallohad Kannur | Shyju | 94000 25049. | | |

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Test Check (Minimum of 10/15 percent%) of beneficiaries assisted during the year 2021-22

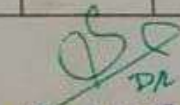
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Part - 1

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|---------|---|-----------------------|--------|-----|---------------------|------------------|-----------------|-----------------------|-------------------|--------------|--|--------------------|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | | DELNA MARIA | F | 12 | SAYJU | THORNICHAL | 790741 8754 | Thornichal Ayyanad | 3 | 31/3/2022 | - | 31-03-2022 | Satisfactory |
| | | Isac Sebastian | M | 19 | Mansi | (THornicha) | 965615 2959 | Thornichal Ayyanad | 4 | 31/3/22 | - | 31-3-22 | Satisfactory |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

* 15% in case of grants in-aid upto Rs.10.00 lakh and 10% in case of grant- in aid exceeding Rs.10.00 lakh




 DR. Sagar. m. r.
 డాక్టర్ ఆఫ్ ప్రైమరీ హెల్త్ సెంటర్ / బ్లాక్ / టెన్సిల్ / టెన్సిల్డార్ ఆఫ్ నాబాబ్ టెన్సిల్డార్
 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