

ABOCW/MA/HLK/01/20

List of Medical Assitance extended to the beneficiariesof the District Hailakandi for the year 2020

Sl. No.	Name of the applicant	Registration No. & date of beneficiary	Name of the Registration office	Date of Admiss ion	Date of Dischar ge	Days of Admiss ion	A/c holder name	Causes	Amount of Medical Assistance	Amount of One time Exgratia	Total amount	Branch name
1	Anam uddin Laskar	HLK/701, dt.26.03.2015	L.O. Hailakandi		45 days		Anam uddin laskar	Surgery	13000.00	0	13000.00	Hailakandi
Total Rs.											13000.00	

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