

HANDICAPPED CHILDREN'S REGENRATION ORGANISATION

(Regd.:111) PAN: AABTH2338B

www.hcro.org.in

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Sponsorship Form for Financial Assistance

Reg. No. HCRO/AN17/55 Dated: 01/02/2017

PATIENT'S NAME: - Baby Sheza Fatima

Age : 10+Month

Sex : FEMALE

PATIENTS DETAILS: Baby Sheza Fatima, 10+Month old is a case of heart disease. She needs surgery required (TOF). The total cost of surgery is Rs. 60,000. Her father is a daily wager and earns Rs. 4,500 per month. They are the resident of Dist.Uttar Dinajpur, (W.B.). There are 4 members in the family. Due to poor financial condition they are not able to bear the expense. So they approached HCRO for sponsorship.

FAMILY DETAILS:-

Father's Name: Shabaz Anwar Mother's Name: Nazia

Age : 36 yrs Age : 33 yrs

Occupation : Daily Wager Occupation ...; House wife

Total annual income : 54,000
FINANCIAL ASSISTANCE DETAILS:-

Cost of Surgery : 60,000

MEDICAL TREATMENT DETAILS:-

Disease suffering From : Heart disease

Treatment Prescribed : TOF

Doctor Concerned : Dr. Balram Airan
Hospital Name and Address: - AllMS Hospital,

New Delhi

Signature of the Doctor in Charge
Hospital seal

Declaration

I declare that information given above is correct and complete in all respect and I am not in a position to arrange funds for the purpose stated above.

Signature of Applicant/Parents

COVERNMENT OF WEST BENGAL OFFICE OF THE BLOCK DEVELOPMENT OFFICER, ISLANFUR, UTTAR DINASPUR.

TO WHOM IT. MAY CONCERN.

I wish him/her all success in his/her life.



Block Perslopment Officer, Islampur, Uttor Dinapur,

