

ALL INDIA JAIN YOUTH

MAHAVEER JAIPUR ARTIFICIAL LIMBS

Sl. No. 1	Name, Father's Name & Address of Beneficiary 2 & 3	Male/ Female	Age	Income	Type of Aid given	Date on which given	Cost of Aid	Fabrication/ Fimrest Changes
		4	5	6	7	8	9	10
1306	Abdelraf. H. Karjar at - Yalapur on Hubli	M	25	600	KAFD	2-3-16	1500	300
1307	Pravien. Guralingappa Bandi at - Hanaligund Tal. Raibagi, Belgaur	M	32	650	KAFD	2-3-16	1500	300
1308	Memata. Nagappa at Jogihalli Tal. Hirakur, Haveli	M	24	800	SK Shooh line	2-3-16	1300	300
1309	Deva ppa. Hanamal- Modar. at - Golagi. Tal. Kuelagi Koppal	M	45	800	SK	3-3-16	1300	300
1310	Nayaz. Saibad. at - Sadashivgad. Karwar	M	25	600	BIL AFD	3-3-16	1200	200
1311	Basavraj. V. Shilavant at Savad. Tal. Ron. Gadag 8722991226	M	34	600	AFD	3-3-16	1200	300
1312	Gulappa - Fakirappa Jankaraval at - Govankoppa Tal. Nharwad.	M	58	850	SK	4-3-16	1300	300

FEDERATION'S (R) - HUBLI.

& CALLIPERS CENTRE, K.L.M.S. VIDYANAGAR, HUBLI.

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Total Cost of Aid	Subsidy Provided	Travel cost paid to out station beneficiary	Boarding and lodging expenses paid	Total column 12 + 13 + 14	No. of day's for which stayed	Signature of Beneficiary	Whether accompanied by Escort
11	12	13	14	15	16	17	18
1800	-	-	-	-	1	S.H. Karwar	
1800	-	-	-	-	1	[Signature]	
1600	-	-	-	-	1	[Signature]	
1600	-	-	-	-	1	[Signature]	
1600	-	-	-	-	1	[Signature]	
1600	-	-	-	-	1	[Signature]	
2000	-	-	-	-	1	[Signature]	
1600	-	-	-	-	1	[Signature]	