

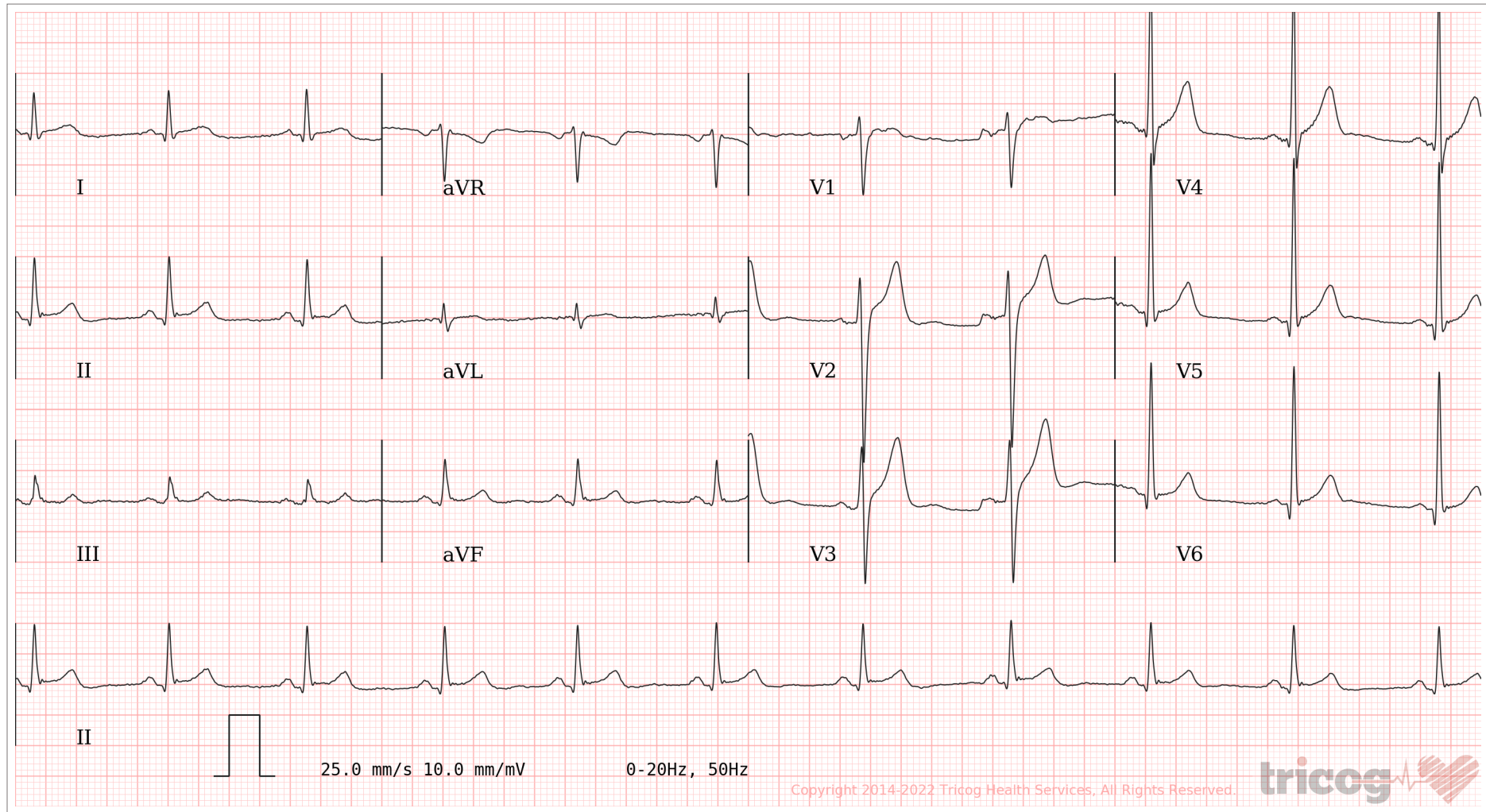


Age / Gender: 34/Female

Date and Time: 12th Feb 22 10:52 AM

Patient ID: CVAR0105472122

Patient Name: Mrs.DEEPIKA SHRIVASTAVA-BOBE6237



AR: 65 bpm VR: 65 bpm QRSD: 96 ms QT: 376 ms QTc: 391 ms PRI: 142 ms P-R-T: 62° 55° 56°

Sinus Rhythm, Normal Axis, Left Ventricular Hypertrophy. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

REPORTED BY

Dr. Velmurugan. J



CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795,0542-2223232
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.DEEPIKA SHRIVASTAVA-BOBE6237	Registered On	: 12/Feb/2022 09:33:59
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 12/Feb/2022 11:00:28
UHID/MR NO	: CVAR.0000026305	Received	: 12/Feb/2022 11:06:15
Visit ID	: CVAR0105472122	Reported	: 12/Feb/2022 15:36:51
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	O
Rh (Anti-D)	POSITIVE

Complete Blood Count (CBC) * , Blood

Haemoglobin	12.90	g/dl	Male- 13.5-17.5 g/dl Female-12.0-15.5 g/dl
TLC (WBC)	4,500	/Cu mm	4000-10000
DLC			
Polymorphs (Neutrophils)	50.00	%	55-70
Lymphocytes	40.00	%	25-40
Monocytes	5.00	%	3-5
Eosinophils	5.00	%	1-6
Basophils	0.00	%	< 1
ESR			
Observed	20.00	Mm for 1st hr.	
Corrected	10.00	Mm for 1st hr.	< 20
PCV (HCT)	39.50	cc %	40-54
Platelet count			
Platelet Count	1.5	LACS/cu mm	1.5-4.0
PDW (Platelet Distribution width)	nr	fL	9-17
P-LCR (Platelet Large Cell Ratio)	nr	%	35-60
PCT (Platelet Hematocrit)	nr	%	0.108-0.282
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0
RBC Count			
RBC Count	4.36	Mill./cu mm	3.7-5.0
Blood Indices (MCV, MCH, MCHC)			
MCV	90.50	fl	80-100
MCH	29.50	pg	28-35
MCHC	32.70	%	30-38
RDW	12.70	%	11-16
RDW-CV	42.30	fL	35-60
Neutrophils Count	2,250.00	/cu mm	3000-7000
Eosinophils Count (AEC)	225.00	/cu mm	40-440



Dr.S.N. Sinha (MD Path)





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLUCOSE FASTING , Plasma

Glucose Fasting	69.20	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.20	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	33.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	103	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%) NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level





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MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type I diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy
c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen)	7.30	mg/dL	7.0-23.0	CALCULATED
<i>Sample:Serum</i>				

Creatinine	0.80	mg/dl	0.5-1.2	MODIFIED JAFFES
<i>Sample:Serum</i>				

e-GFR (Estimated Glomerular Filtration Rate)	101.00	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
<i>Sample:Serum</i>				

Uric Acid	4.20	mg/dl	2.5-6.0	URICASE
<i>Sample:Serum</i>				

LFT (WITH GAMMA GT) * , Serum





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
SGOT / Aspartate Aminotransferase (AST)	22.80	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	19.10	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	22.20	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.50	gm/dl	6.2-8.0	BIRUET
Albumin	4.50	gm/dl	3.8-5.4	B.C.G.
Globulin	3.00	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.50		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	61.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.40	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.20	mg/dl	< 0.8	JENDRASSIK & GROF

LIPID PROFILE (MINI), Serum

Cholesterol (Total)	176.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	49.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	115	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	12.24	mg/dl	10-33	CALCULATED
Triglycerides	61.20	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



S.N. Sinha
Dr. S.N. Sinha (MD Path)





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UHID/MR NO	: CVAR.0000026305	Received	: 12/Feb/2022 11:06:15
Visit ID	: CVAR0105472122	Reported	: 12/Feb/2022 14:48:05
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (5.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	0-1/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2
(++++)	> 2





CHANDAN DIAGNOSTIC CENTRE

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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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S.N. Sinha
Dr. S.N. Sinha (MD Path)





CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
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Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 12/Feb/2022 11:00:28
UHID/MR NO	: CVAR.0000026305	Received	: 12/Feb/2022 16:09:16
Visit ID	: CVAR0105472122	Reported	: 12/Feb/2022 16:19:22
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL * , Serum

T3, Total (tri-iodothyronine)	98.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	7.45	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.37	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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UHID/MR NO	: CVAR.0000026305	Received	: N/A
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DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

X-Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

*** NO OBVIOUS DETECTABLE ABNORMALITY SEEN**



Dr Raveesh Chandra Roy (MD-Radio)





CHANDAN DIAGNOSTIC CENTRE

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CIN : U85110DL2003PLC308206



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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

- **LIVER:** - Normal in size (12.7 cm), shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- **GALL BLADDER :-** Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.
- **CBD :-** It measures 2.3 mm in caliber.
- **PORTAL VEIN:** - It measures 7.8 mm in caliber.
- **PANCREAS:** - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.
- **SPLEEN:** - Normal in size (8.8 cm), shape and echogenicity.
- **RIGHT KIDNEY:** - Normal in size (8.5 x 3.5 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- **LEFT KIDNEY:** - Normal in size (8.6 x 4.0 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- **URINARY BLADDER :-** Partially filled. Prevoid urine volume 22 cc.
- **UTERUS :-** Anteverted. Size (64 x 38 x 26 mm/34 cc). No focal myometrial lesion seen. Endometrium thickness 2.7 mm.
- **OVARIES :-** Left ovary visualized. Right ovary obscured.
- Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy
- No free fluid is seen in the abdomen/pelvis.

IMPRESSION : No significant abnormality seen.

Please correlate clinically.

***** End Of Report *****

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE, ECG / EKG



Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Conduction Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location



CHANDAN DIAGNOSTIC CENTRE

Name of Company: Medi Wheel
Name of Executive: Deepika Shrivastava
Date of Birth: 28 / 02 / 1987
Sex: Female / Male
Height: 159.....CMs
Weight: 53.....KGs
BMI (Body Mass Index) :
Chest (Expiration / Inspiration) 80 / 84.....CMs
Abdomen: 70.....CMs
Blood Pressure: 116...../76.....mm/Hg
Pulse: 76.....BPM - Regular / Irregular
RR: 17.....Resp/Min
Ident Mark: Mole on lt leg.
Any Allergies: No
Vertigo: No
Any Medications: No
Any Surgical History: No
Habits of alcoholism/smoking/tobacco: No
Chief Complaints if any: No
Lab Investigation Reports: Umbilical Herniation - 1 Yr. -
Eye Check up vision & Color vision: Normal c glass - 24/60
Left eye: Normal
Right eye: Normal
Near vision: 0.25 D.
Far vision: Normal.



CHANDAN DIAGNOSTIC CENTRE

Dental check up : Normal
ENT Check up : Normal
Eye Checkup : Normal

Final impression

Certified that I examined Deepika Sinhas tanna S/o or D/o
is presently in good health and free from any cardio-respiratory/communicable
ailment, he/she is fit / Unfit to join any organization.

R.C. Roy

Client Signature :-

Deepika

Dr. R.C. ROY
MBBS.,MD. (Radio Diagnosis)
Reg. No.-26918

Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD)

Date 12/02/2022, Place Vaeranda



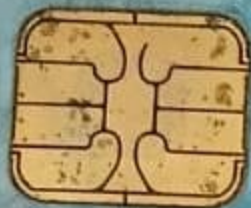


INDIAN UNION DRIVING LICENCE

MADHYA PRADESH STATE

Form 7

04A0637289



Number : MP28/004183/05
 Name : KU.DEEPIKA
 SHRIVASTAVA
 S/D/W of : SHRI A.K.SHRIVASTAVA
 Address : E 27 TEACHERS COLONY
 KHAJRI
 CHHINDWARA



Issued on : 10/06/2005
 DOB : 28/02/1987BG:

is Licence to drive
 MC WITHOUT GEAR,

HOLDER SIGNATURE
Deepika

See reverse for
 Authentication
 Issuing Authority CHHINDWARA

Valid for Non-Transport Vehicles from 10/06/2005 to 09/06/2025
 Valid for Transport Vehicles from . to



P- 93, Shivaji Nagar Colony, Mahmoorganj,
Varanasi, Uttar Pradesh 221010, India

Latitude

Longitude

25.305454°

82.979103°

LOCAL 10:28:22

SATURDAY 02.12.2022

GMT 04:58:22

ALTITUDE 19 METER