

Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:25PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 03:30PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

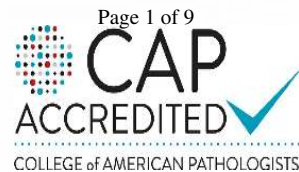
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12	g/dL	12.5-15	Spectrophotometer
PCV	36.70	%	36-46	Electronic pulse & Calculation
RBC COUNT	3.81	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	96.2	fL	83-101	Calculated
MCH	31.5	pg	27-32	Calculated
MCHC	32.7	g/dL	31.5-34.5	Calculated
R.D.W	18.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,130	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	56	%	40-80	Flow cytometry
LYMPHOCYTES	35	%	20-40	Flow cytometry
EOSINOPHILS	1	%	1-6	Flow cytometry
MONOCYTES	8	%	2-10	Flow cytometry
BASOPHILS	0	%	0-2	Flow cytometry
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2312.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1445.5	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	41.3	Cells/cu.mm	20-500	Calculated
MONOCYTES	330.4	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.6		0.78- 3.53	Calculated
PLATELET COUNT	241000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC				
WBC WITHIN NORMAL LIMITS				
PLATELETS ARE ADEQUATE ON SMEAR				

M. Muttavarapu Viswanath

Dr. Muttavarapu Viswanath
M.B.B.S.,M.D(Pathology)
Consultant Pathologist

SIN No:UPP241002170

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad



Patient Name : Mrs.LAVANYA BHRAMINLAPALLY
Age/Gender : 39 Y 1 M 2 D/F
UHID/MR No : CUPP.0000092233
Visit ID : CUPPOPV140853
Ref Doctor : Self
Emp/Auth/TPA ID : 9920144559

Collected : 23/Oct/2024 10:12AM
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

NO HEMOPARASITES SEEN

M. Muttavarapu Viswanath

Dr. Muttavarapu Viswanath
M.B.B.S., M.D (Pathology)
Consultant Pathologist

SIN No: UPP241002170

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CAP
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COLLEGE of AMERICAN PATHOLOGISTS



Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:25PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 07:57PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

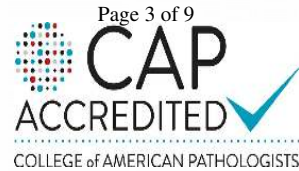
Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

M. Muttavarapu Viswanath

Dr. Muttavarapu Viswanath
M.B.B.S.,M.D(Pathology)
Consultant Pathologist

SIN No:UPP241002170

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Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:32PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 03:38PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	76	mg/dL	70-100	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

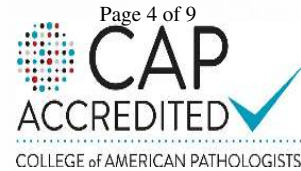
Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



Dr.Matta Sujana Reddy
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist



SIN No:UPP241002172

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:30PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 03:40PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	84	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

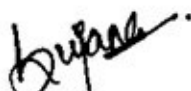
Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	10	U/L	<35	IFCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.
ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.
The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist



Dr. Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist



SIN No:UPP241002171

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:30PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 03:11PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL , SERUM	0.89	mg/dL	0.3–1.2	DPD



Dr. Matta Sujana Reddy
M.B.B.S, M.D (Biochemistry)
Consultant Biochemist

SIN No: UPP241002171

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Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:30PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 03:40PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF BIOCHEMISTRY

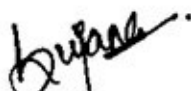
ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO , SERUM				
BLOOD UREA NITROGEN	6.8	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.76	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
BUN / CREATININE RATIO	8.92			Calculated

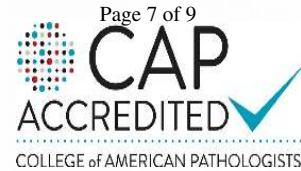
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE , SERUM				
CREATININE	0.76	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist



Dr. Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist



SIN No:UPP241002171

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Patient Name : Mrs.LAVANYA BHRAMINLAPALLY	Collected : 23/Oct/2024 10:12AM
Age/Gender : 39 Y 1 M 2 D/F	Received : 23/Oct/2024 02:32PM
UHID/MR No : CUPP.0000092233	Reported : 23/Oct/2024 04:59PM
Visit ID : CUPPOPV140853	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9920144559	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	LIGHT TURBID		CLEAR	Scattering of light
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.013		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	POSITIVE+		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	26	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	1	/hpf	< 10	Automated Image based microscopy
RBC	1	/hpf	0-2	Automated Image based microscopy
CASTS	ABSENT	/lpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	ABSENT	/hpf	Occasional-Few	Automated Image based microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.

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Dr. R. SHALINI
M.B.B.S., M.D (Pathology)
Consultant Pathologist

SIN No: UPP241002169

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

Patient Name : Mrs.LAVANYA BHRAMINLAPALLY
Age/Gender : 39 Y 1 M 2 D/F
UHID/MR No : CUPP.0000092233
Visit ID : CUPPOPV140853
Ref Doctor : Self
Emp/Auth/TPA ID : 9920144559

Collected : 23/Oct/2024 10:12AM
Received : 23/Oct/2024 02:32PM
Reported : 23/Oct/2024 04:59PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr.R.SHALINI
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:UPP241002169

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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Patient Name : Mrs.LAVANYA BHRAMINLAPALLY
Age/Gender : 39 Y 1 M 2 D/F
UHID/MR No : CUPP.0000092233
Visit ID : CUPPOPV140853
Ref Doctor : Self
Emp/Auth/TPA ID : 9920144559

Collected : 23/Oct/2024 10:12AM
Received : 23/Oct/2024 02:32PM
Reported : 23/Oct/2024 04:59PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr. R. SHALINI
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No: UPP241002169

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



Patient Name	: Mrs. Lavanya Bhraminlapally	Age	: 39Yrs 1Mths 4Days
UHID	: CUPP.0000092233	OP Visit No.	: CUPPOPV140853
Printed On	: 24-10-2024 06:13 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 9920144559		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

For clinical correlation.

---End Of The Report---

Jyothirmai

Dr. MATTA JYOTHIRMAI
MBBS, MDRD
APMC/FMR/74706
Radiology

PHYSICAL EXAMINATION FORM

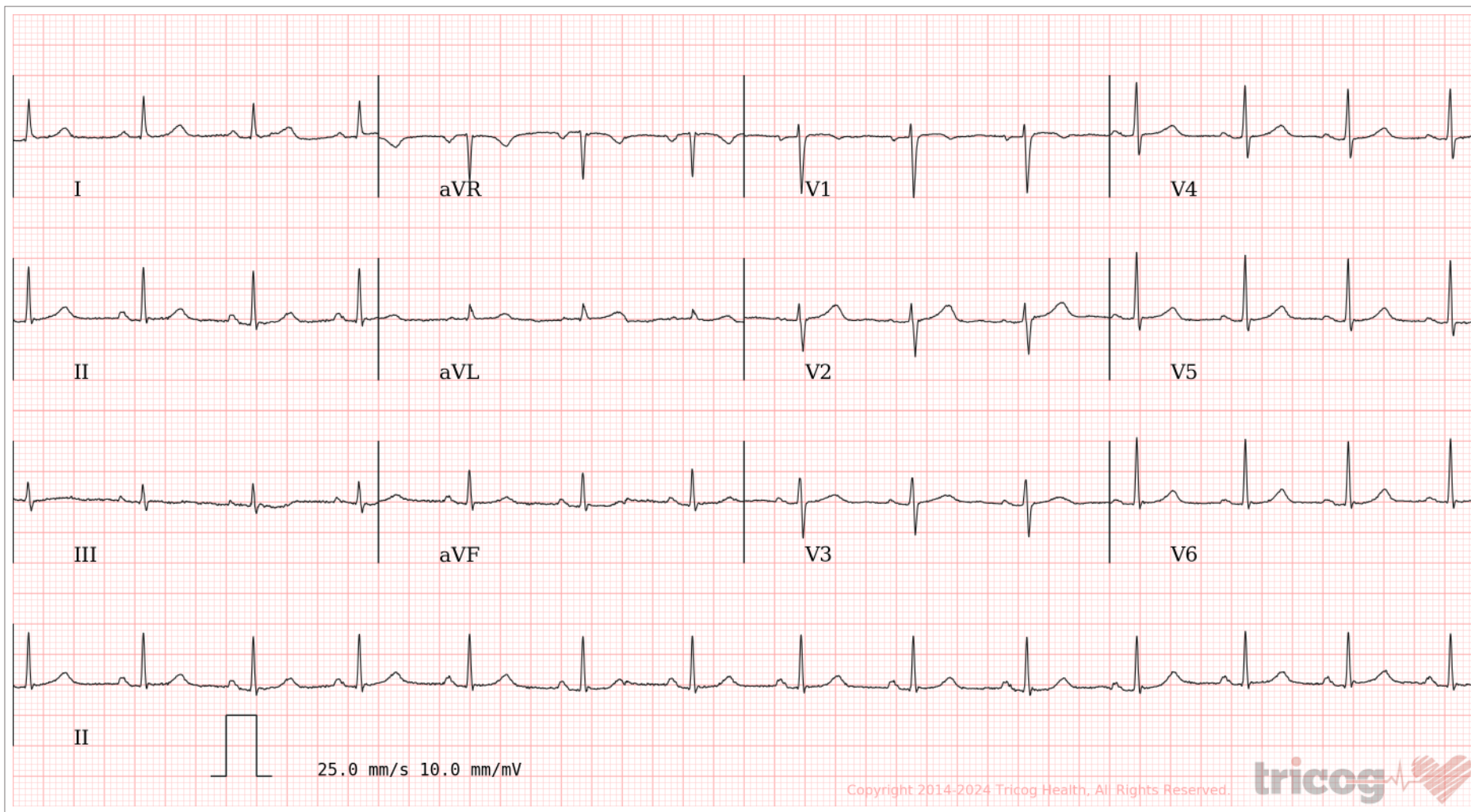
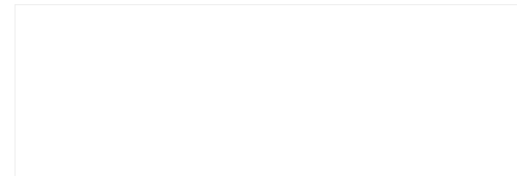
Name	Mrs. Lavanya Bhraminlapally	Age & Gender	39 Y /F
UHID	CUPP.0000092233	DATE	23.10.2024

Vitals	
Height (CM)	162
Weight (KG)	68
BMI	25.9
BP	110/70
Pulse	71
SPO2 (%)	NA
Temperature	NA



Age / Gender: 39/Female
Patient ID: 0000092233
Patient Name: Mrs Lavanya B

Date and Time: 23rd Oct 24 10:04 AM



AR: 84bpm VR: 84bpm QRSD: 64ms QT: 348ms QTcB: 411ms PRI: 140ms P-R-T: 56° 44° 46°

ECG Within Normal Limits: Sinus Rhythm, Normal ECG, correlate clinically. Please correlate clinically.

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

REPORTED BY



72045

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Lavanya B. on 24/10/24.

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> Medically Fit 	<input type="checkbox"/>
<ul style="list-style-type: none"> Fit with restrictions/recommendation: <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job</p> <p>1. <u>UTI</u></p> <p>2. _____</p> <p>3. _____</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after <u>Urine for c/s.</u></p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> Currently Unfit. Review after _____ recommended 	<input type="checkbox"/>
<ul style="list-style-type: none"> Unfit 	<input type="checkbox"/>

Dr. KOPPULA TRIVENI
M.D.S.
Medical Officer/05078
APOLLO FAMILY PHYSICIAN

This certificate is not meant for medico-legal purposes

Apollo Health and Lifestyle Limited

APOLLO CLINICS NETWORK TELANGANA & AP | Hyderabad (AS Rao Nagar | Charana Nagar | Jubilee Hills | Kondapur | Madhapur | Malibondera | Nizampet | Uppal) | Vizag (Sethurama Peta) | Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

1860 500 7788

POWER PRESCRIPTION

NAME: B. Javanya

GENDER: M/F ✓

DATE: 23/10/2024

AGE: 39 yrs

UHID:

Mob - 8125168796

RIGHT EYE

LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	—————			6/6
NEAR				N6

	SPH	CYL	AXIS	VISION
DISTANCE	—————			6/6
NEAR				N6

COLOUR VISION : RE: normal

DIAGNOSIS :
OTHER FINDINGS :
INSTRUCTIONS :



SIGNATURE

Apollo Clinic Uppal

From: noreply@apolloclinics.info
Sent: Tuesday, October 22, 2024 02:37 PM
To: network@mediwheel.in
Cc: Apollo Clinic Uppal; Nishanth Reddy; Syamsunder M
Subject: Your appointment is confirmed



Dear Lavanya Bhraminlapally ,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **UPPAL** clinic on **2024-10-23** at **07:00-07:15**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: APOLLO CLINIC NEAR PILLAR NO 91, BESIDE RAMRAJ COTTON SHOWROOM,CANARA NAGAR BUS STOP, WARANGAL HIGHWAY,.

Contact No: (040) 49503373 -74/.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic



భారత ప్రభుత్వం
Government of India

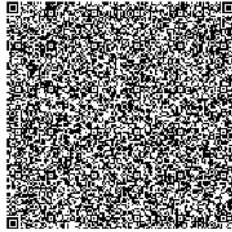
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 0623/03563/05295

Download Date: 31/08/2020

To
బి లావణ్య
B Lavanya
D/O Prakash Goud
10-5-568
wadara basti
thukaram gate
Maredpalle
Hyderabad Andhra Pradesh - 500026
8125168796

Issue Date: 26/08/2020



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5103 9582 4690

VID : 9126 5471 6062 9807

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



బి లావణ్య
B Lavanya
పుట్టిన తేదీ/DOB: 21/09/1985
(♀) FEMALE

Download Date: 31/08/2020

Issue Date: 26/08/2020

5103 9582 4690

VID : 9126 5471 6062 9807

నా ఆధార్, నా గుర్తింపు



సమాచారం

- ఆధార్ ఒక గుర్తింపు మాత్రమే పౌరసత్వం కాదు
- సురక్షితమైన క్యూఆర్ కోడ్ / ఆఫ్ లైన్ ఎక్స్ ఎం ఎల్ / ఆన్ లైన్ ప్రామాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి .
- ఇది ఎలక్ట్రానిక్ పద్ధతిలో వ్రాయబడిన లేఖ.

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ఆధార్ దేశవ్యాప్తంగా చెల్లుబాటు అవుతుంది.
- వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలను సులువుగా పొందటానికి ఆధార్ మీకు సహాయపడుతుంది.
- ఎల్లప్పుడూ మీ మొబైల్ నెంబర్ మరియు ఇమెయిల్ ఐడిని ఆధార్ లో అప్ డేట్ చేసి ఉంచండి
- ఎమ్-ఆధార్ ఆప్ ఉపయోగించండి - మీ ఆధార్ ను ఎల్లప్పుడూ మీ స్మార్ట్ ఫోన్ లో ఉంచండి.

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.

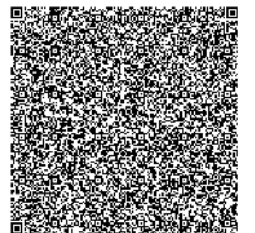


భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India



వినూనామా:
D/O ప్రకాష్ గౌడ్, 10-5-568, వాడార బస్టి, తుకారం
గేటు, మరేడ్పల్లె, హైదరాబాద్,
ఆంధ్ర ప్రదేశ్ - 500026

Address:
D/O Prakash Goud, 10-5-568, wadara basti,
thukaram gate, Maredpalle, Hyderabad,
Andhra Pradesh - 500026



5103 9582 4690

VID : 9126 5471 6062 9807

1947 | help@uidai.gov.in | www.uidai.gov.in