

Report Number : IR/286261	Web Slip No : SAS/INV/99/188796-09/2021
Lab Slip No. : SASGO/INV/189380-09/2021	Report Date : 11/09/2021 7:13:00PM
Patient Name : RABISANKAR DAS	Collection Date : 11/09/2021 4:27:00PM
Age / Sex : 29 Year /Male	Phlebotomist :
Referred By : SELF	Collected From : SINTHI-APOLLO

REPORT PREPARED ON PATHOLOGY
DEPARTMENT OF HAEMATOLOGY


Test Name	Value	Unit	Normal Range
Haemoglobin	15.5	gm%	Child : 11.0 - 15.5gm% (M) : 13.0-17.0gm% (F) : 11.0-15.0gm% Up to 15 days : 16 -24gm%
<i>Instrument Used:</i>			
Haematocrit (PCV)	44.7	%	42 - 52
Mean Corpuscular Volume (MCV)	89.2	fl	76 - 101
Mean Corpuscular Hemoglobin (MCH)	30.9	pg	27.0 - 32.0
Mean Corpuscular Hemoglobin Concentration (MCHC)	34.7	%	31.5 - 34.5
Platelet Count	1.51	lacs/cmm	1.5 - 4.5
Total Count (TC)			
Total Leucocytes	4500	/cmm	4000 - 11000
Total Erythrocytes	5.01	mill/cmm	4.5 - 5.5
Differential Count (DC)			
Neutrophil	55	%	40 - 75
Lymphocyte	38	%	20 - 45
Monocyte	03	%	02-10
Eosinophil	04	%	01 - 06
Basophil	00	%	00 - 01
ESR (Erythrocyte Sedimentation Rate)	11	mm	0 - 15
<i>Methodology: Westergren method</i>			
RBC Morphology	NORMOCHROMIC.NORMOCYTIC		

INSTRUMENT USED:
HORIBA (YUMIZEN H500)
*Please Correlate with Clinical Conditions.

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

Report Prepared By

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University
Licensee : Satyam Credit Pvt. Ltd.
36C, B. T. Road, Kolkata - 700 002
E-mail : sinthimor@theapolloclinic.com
satyamcreditpvtltd@gmail.com


DR. GOUTAM SAHA
MD (Path)
Consultant Pathologist

 033 2556 3333	 033 2556 5555
 +91 98521 66666	 +91 74392 97827

Report Number : IR/286393	Web Slip No : SAS/INV/99/188796-09/2021
Lab Slip No. : SASGO/INV/189380-09/2021	Report Date : 11/09/2021 9:14:00PM
Patient Name : RABISANKAR DAS	Collection Date : 11/09/2021 4:27:00PM
Age / Sex : 29 Year /Male	Phlebotomist :
Referred By : SELF	Collected From : SINTHI-APOLLO

REPORT PREPARED ON PATHOLGY
DEPARTMENT OF BIOCHEMISTRY

Test Name	Value	Unit	Normal Range
GLUCOSE FASTING <i>Methodology: GOD POD Instrument Used: AGAPPE (Mispa Clinia Plus)</i>	95	mg/dl	70 - 110

*Please Correlate with Clinical Conditons.

NOTE: Regarding blood sugar levels, if a patient is diabetic and if He/she is on oral medication for diabetes, the sugar levels can be fasting blood sugar level more than the post prandial blood sugar. This happens because most of the anti-diabetic medications are taken either with or before breakfast. If the patient is not a diabetic, as soon as He/she takes the breakfast, it will act as a stimulant to produce insulin in the body and that will bring down the post prandial blood sugar level (PP). Normal diet can be 2 or 3 doses, chapatis or rotis, in which the blood glucose level will be lower than 75 grams of direct glucose. This direct glucose might also increase the sugar level to 260. Another scenario for increase in sugar after empty stomach will be because of the hormone called glucagon, which will induce glycogenolysis and neoglucogenesis in the body when the sugar levels are very low. In this mechanism, the stored glycogen or lipids will be converted into glucose, thus increasing the blood sugar level.


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


Report Prepared By,

PRAYANJONAL

DR. GOUTAM SAHA
MD (Path)
Consultant Pathologist

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University
Licensee : Satyam Credit Pvt. Ltd.
36C, B.T. Road, Kolkata - 700 002
E-mail : sinthimor@theapolloclinic.com
satyamcreditpvtltd@gmail.com

 **033 2556 3333**

 **033 2556 5555**

 **+91 98521 66666**

 **+91 74392 97827**

Report Number : IR/286399	Web Slip No : SAS/INV/99/188796-09/2021
Lab Slip No. : SASGO/INV/189380-09/2021	Report Date : 11/09/2021 9:20:00PM
Patient Name : RABISANKAR DAS	Collection Date : 11/09/2021 4:27:00PM
Age / Sex : 29 Year /Male	Phlebotomist :
Referred By : SELF	Collected From : SINTHI-APOLLO


REPORT PREPARED ON PATHOLOGY
DEPARTMENT OF SEROLOGY

Test Name	Value	Unit	Normal Range
BLOOD GROUPING	"A"		
Rh Factor	Positive		


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


Report Prepared By:

SUBBICK KARANIKAR


DR. GOUTAM SAHA
 MD (Path)
 Consultant Pathologist

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University
Licensee : Satyam Credit Pvt. Ltd.
 36C, B. T. Road, Kolkata - 700 002
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satyamcreditpvtltd@gmail.com

 **033 2556 3333**

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 **+91 98521 66666**

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Patient Name: Mr. RABISANKAR DAS
UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
Sample collected on: 13.09.2021
Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: BLOOD

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
BLOOD UREA NITROGEN (BUN) BLOOD UREA NITROGEN (BUN) Method: Calculated	13.7	8 - 20	mg/ dl
CREATININE Methodology: Jaffe Reaction Instrument Used: FULLY AUTOMATED ANALYZER EM-200	1.2	Male: 0.7-1.4 Female: 0.6-1.2 Newborn: 0.3-1.0 Infant: 0.2-0.4 Child: 0.3-0.7 Adolescent: 0.5-1.0	mg/dl
URIC ACID URIC ACID Method: Uricase	4.9	Female: 2.6 - 6.0 Male: 3.4 - 7.0	mg/dl

End of the report

Results are to be correlated clinically


BX

Lab Technician / Technologist
Susmita_Saha

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST

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Opp. of Rabindra Bharati University
Licensee : Satyam Credit Pvt. Ltd.

36C, B. T. Road, Kolkata - 700 002
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 Specimen: BLOOD

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DEPARTMENT OF SPECIAL BIOCHEMISTRY
REPORT PREPARED ON PATHOLOGY

Test Name	Value	Unit	Normal Range
Glycosylated Haemoglobin (HbA1c), HPLC Glycosylated Haemoglobin (HbA1c), HPLC	4.9	%	Excellent Control: <4 Good Control: 4-6 Fair Control: >6-7 Action Suggested: >7-8 Poor Control: >8
Estimated Average Glucose (EAG)	118	mg/dL	Excellent Control: 90-120 Good Control: 120-150 Fair Control: > 150-180 Action Suggested: 181-210 Panic Value: >211

Methodology: HPLC
 Instrument Used: Bio-Rad D-10

Comment

- For patients with Hb variant diseases there may be lowering of HbA1c due to low HBA synthesis.
- EAG is value calculated from HbA1c & indicates average glucose level over past three months.

Factors that interfere with HbA1c Measurement: Genetic variants (e.g. Hbs trait, HbC trait), elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements. The effects vary depending on the specific Hb variant or derivative and the specific HbA1c method.

Factors that affect interpretation of HbA1c Results: Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results regardless of the assay method used.

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

Lab Technician / Technologist
 Susmita_Saha

DR. BIPARNAK HALDAR
 MBBS, MD (PATHOLOGY)
 CONSULTANT PATHOLOGIST

APOLLO CLINIC @ OM TOWER
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UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
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Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: BLOOD

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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE</u>	<u>UNITS</u>
GLUCOSE- (POST PRANDIAL) GLUCOSE- (POST PRANDIAL) Method: (GOD-POD)	129.0	70.0- 140.0	mg/dL

End of the report

Results are to be correlated clinically

BK

Lab Technician / Technologist
Madhumita_Biswas

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
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Patient Name: Mr. RABISANKAR DAS
UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
Sample collected on: 13.09.2021
Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: BLOOD

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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNIT</u>
TSH:THYROID STIMULATING HORMONE-SERUM TSH:THYROID STIMULATING HORMONE-SERUM Method : CLIA	2.73	0.35-5.50	uIU/ml
TOTAL T3: TRI IODOTHYRONINE – SERUM TOTAL T3: TRI IODOTHYRONINE – SERUM Method : CLIA	0.99	0.87 – 1.78	ug/dl
TOTAL T4: THYROXINE – SERUM TOTAL T4: THYROXINE – SERUM Method : CLIA	09.08	8.09 – 14.03	ug/dl

End of the report

Results are to be correlated clinically

BK

Lab Technician / Technologist
Susmita_Saha

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST

Patient Name: Mr. RABISANKAR DAS
UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
Sample collected on: 13.09.2021
Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: URINE

URINE ROUTINE EXAMINATION

URINE FOR ROUTINE EXAMINATION

Test Name	Result	Unit	Method
Specimen: Urine			
<u>PHYSICAL EXAMINATION</u>			
QUANTITY	42	ml	Container Measurement
COLOUR	Pale Yellow		Naked Eye Observation
APPEARANCE	Clear		Naked Eye Observation
REACTION	Acidic		Multiple Reagent Strip
SPECIFIC GRAVITY	1030		Multiple Reagent Strip
<u>CHEMICAL EXAMINATION</u>			
BLOOD	Nil		Multiple Reagent Strip
ALBUMIN	Present(+)		Multiple Reagent Strip / Heat & Acetic Acid
BILE PIGMENT	Nil		Fuchet's Test
BILE SALT	Nil		Hey's Sulphur Test
KETONE BODIES	Nil		Multiple Reagent Strip / Rothera Test
SUGAR	Nil		Multiple Reagent Strip / Benedict
<u>MICROSCOPIC EXAMINATION</u>			
PUS CELL	0-2	/HPF	Light Microscopy
RBC	Not found	/HPF	Light Microscopy
EPITHELIAL CELL	1-3	/HPF	Light Microscopy
MICRO ORGANISM	Present(+)		
Others	Not found		

Note : Any Abnormal Chemical Analysis Rechecked By Rechecked By Respective Manual Method
End of Report

BK

Lab Technician / Technologist
Madhumita_Biswas

Dr. BIPARNAK HALDER
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST



Patient Name: Mr. RABISANKAR DAS
UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
Sample collected on: 13.09.2021
Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: BLOOD

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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
LIVER FUNCTION TEST (PACKAGE) BILIRUBIN-TOTAL Method: Daizo	0.7	1.1 Adult	mg/dl
BILIRUBIN-DIRECT Method: Daizo with DPD	0.3	Adult & Children: <0.25	mg/dl
BILIRUBIN-INDIRECT Method: calculated	0.4	0.1-1.0	mg/dl
TOTAL-PROTIEN Method: Photometric UV test	7.8	Adult: 6.6-8.8	gms/dl
ALBUMIN Method: BCG	4.3	3.5-5.2	gms/dl
SGOT/AST Method: IFCC WITHOUT P5P	38	up to 38	U/L
SGPT/ALT Method: IFCC WITHOUT P5P	84	up to 38	U/L
ALKA-PHOS Method: PNPP-AMP BUFFER	74	Child: 104-380 Adult: 20-116	U/L
GLOBULIN Method: Calculated	3.5	1.8 - 3	gms/dl
A:G Ratio	1:2:2		
GGT [Gamma Glutamyl Transferase]	25	7-32	U/L

End of the report

Lab Technician / Technologist
Susmita_Saha

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Opp. of Rabindra Bharati University
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36C, B. T. Road, Kolkata - 700 002
E-mail : sinthimor@theapolloclinic.com
satyamcreditovt ltd@gmail.com

033 2556 3333

033 2556 5555

+91 98521 66666

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UHID/MR No.: FSIN.0000013296
Visit Date: 13.09.2021
Sample collected on: 13.09.2021
Ref Doctor: SELF

Age/Gender: 29 Years / Male
OP Visit No.: FSINOPV16316
Reported on: 14.09.2021
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIPID PROFILE TEST (PACKAGE)			
Triglyceride Method: GPO-POD	258	<200	mg/dl
Cholesterol Method: CHOD - PAP	214	Desirable blood cholesterol :< 220 Borderline High: 170.0-199.0 High: > 199.0 mg/dl	mg/dl mg/dl
HDL Method: PVS and PEGME coupled	79	50 - 80 mg/dl	mg/dl
LDL Method: Selective Detergent	105	<130.0 mg/dl	mg/dl
VLDL	30	20-35 mg/dl	mg/dl
CHOL : HDL RATIO	2.70	3.0 - 5.0	
LDL : HDL RATIO	1.32	2.6 - 3.6	

End of the report

Results are to be correlated clinically

BK

Lab Technician / Technologist
Madhumita_Biswas

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST

NAME: MR.RABISANKAR DAS	AGE: 29YRS	SEX:MALE
REF BY: CORPORATE	MR NO:FSIN-0000	DATE:11/09/2021

ULTRASOUND OF WHOLE ABDOMEN

LIVER: Liver is **enlarged** in size (**15.49cm**) in shape outline and echotexture. The intrahepatic tubular structures are normal. No focal area of alterea echogenicity is noted. The porta hepatis is normal. The common bile duct measures (**4mm**) in diameter. The portal vein measures (**10mm**) at porta.

GALL BLADDER: Gall bladder is normal. Wall is normal limits. No calculus or mass is seen within the gall bladder.

SPLEEN: It is normal in size (**8.75cm**), Shape, Outline and echotexture. No parenchymal lesion is noted.

PANCREAS: It is normal in size, Shape, Outline and echotexture. Pancreatic duct is not dilated.

RIGHT KIDNEY: kidney are normal in position, size, shape, outline and echotexture. The cortico medullary differentiation is maintained. No calculus or hydronephrosis is seen.

RIGHT KIDNEY: measures – (**10.57cm**).

LEFT KIDNEY: kidney are normal in position, size, shape, outline and echotexture. The cortico medullary differentiation is maintained. No calculus or hydronephrosis is seen.

LEFT KIDNEY: measures –(**11.15cm**).

URINARY BLADDER: It is well distended with Wall is normal . No calculus or mass is seen within the urinary bladder.

PROSTATE: It is normal in size, Shape & homogenous echotexture. The prostatic outline is smooth. The periprostatic plane is normal. It is enlarge size measures- (**4.49cmX3.12cmX2.71cm**) Vol = **12.64 ml**

IMPRESSION:

- **MARGINALLY ENLARGED LIVER.**

DR.A.K.ROY

M.B.B.S, Dip BMSc, DTM&H (Cal)
Certificate on CEBT Abdomino Pelvic, USG(WBHSU)



DEPARTMENT OF RADIOLOGY X-RAY OF CHEST (PA) VIEW

MR. NO- FSIN.0000000

SEX- MALE

NAME: -MR. RABISANKAR DAS

EXAMINATION DATE- 11/09/2021

AGE- 29 YRS

REPORT DATE- 13/09/2021

REF DR.: -SELF

FINDINGS:

- Bilateral lung fields are clear.
- Tracheal shadow is in the midline.
- Bilateral CP angle are clear
- Both hilum appear normal .
- CTR appears normal .
- No definite bone fracture is noted.


DR. ARNAB MANDAL


MD, Physician, PGDUS (Delhi) CEPT-USG (WBUHS KOLKATA)
Fellow of Jefferson Ultrasound Radiology and Education Institute
Philadelphia Ex-Radiology Resident (S.E. Railway)
Regd.No:72022(WBMC)

APOLLO CLINIC @ OM TOWER
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 033 2556 3333

 033 2556 5555

 +91 98521 66666

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Resting ECG Report

Patient Name: Mr. RAJESANKAR DAS 29/M

September 11, 2021

Time: 11:18:30

QT / QTc : 0.320 / 0.355 Sec

P-QRS-T Axis (51)-(27)-(-47) deg

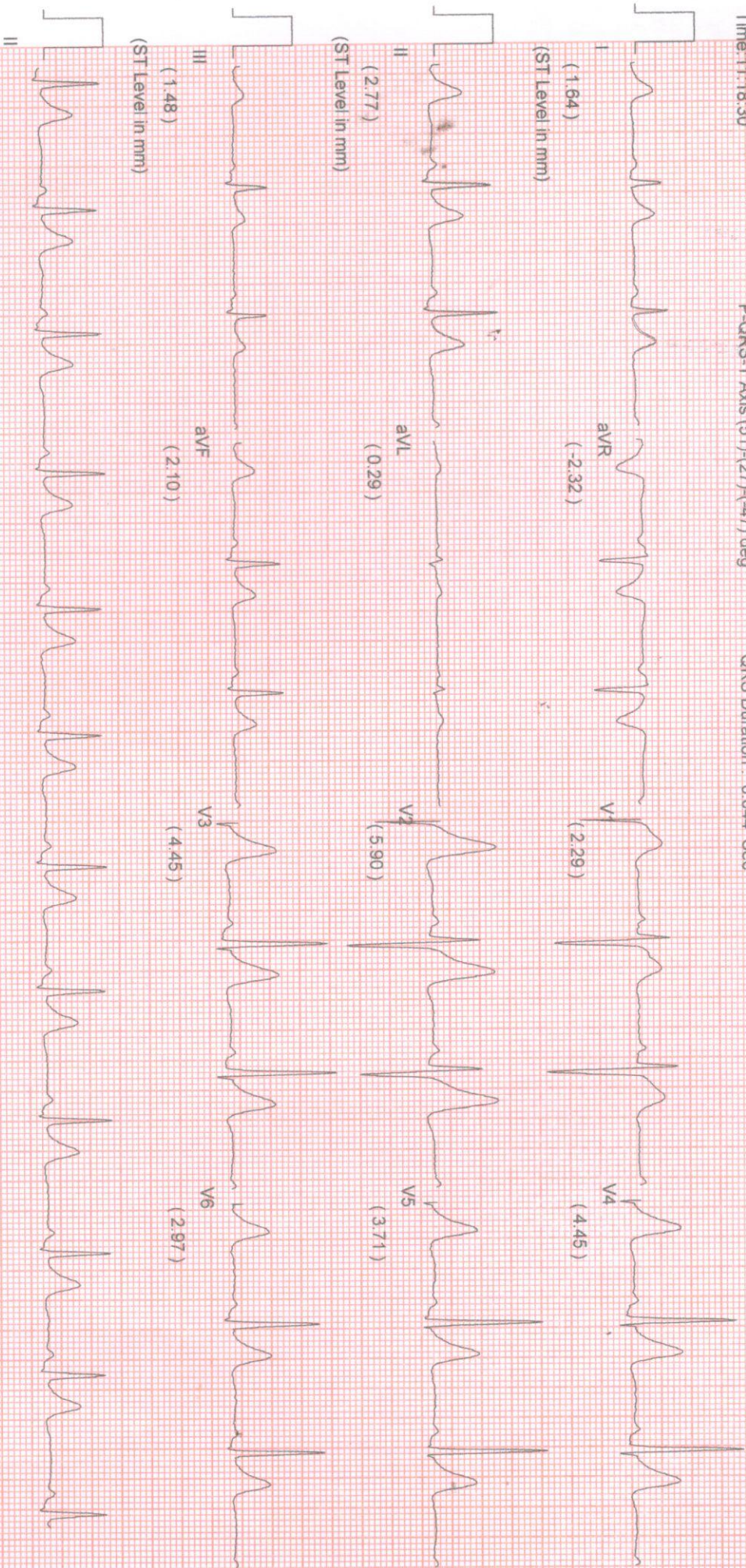
PR Interval: 0.05 sec

QRS Duration : 0.044 Sec

RR Interval: 0.81 sec

HR : 73 bpm

BP : 120 / 80 mmHg



Comments :-

NAME: MR. RABISANKAR DAS	MR NO: FSIN-0000	DATE : 11.09.2021
AGE: 29YRS.	SEX:MALE	REF BY: SELF(CORPORATE)

ECG REPORT

HR : 73 b/min
AXIS : NORMAL
RHYTHM : SINUS
PR INTERVAL : 0.05 sec
QT INTERVAL : 0.355 sec
QRS DURATION : 0.044 sec
T-WAVE : NORMAL.

IMPRESSION:

- RESTING ECG IS WITHIN NORMAL LIMITS.



Dr. SIDDHARTHA KUNDU
MBBS (Cal), PGDCC, CCEBDM
Clinical Cardiologist
Ex Sr Resident, Cardiology Dept
B.R Singh Hospital, Eastern Railway

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. DAS RABISANKAR
EC NO.	120217
DESIGNATION	SWACHHTA SAHAYAK EVAM SAHAYAK
PLACE OF WORK	MAHISASTHALI
BIRTHDATE	09-06-1992
PROPOSED DATE OF HEALTH CHECKUP	11-09-2021
BOOKING REFERENCE NO.	21S120217100003770E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **09-09-2021** till **31-03-2022**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.


Yours faithfully,

Sd/-


Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))


Issue Date: 17/07/2013




भारत सरकार
Government of India



रविशंकर दास
Rabisankar Das
छात्राभिष / DOB: 09/06/1992
पुरुष / Male



5629 9341 4869



भारत
आधार

मेरा आधार, मेरी पहचान

Rabisankar Das

Robisankar
Om

Print Date: 22/06/2021

Address: Sukharia, Hooghly, West Bengal, 712123

1947

help@uidai.gov.in

www.uidai.gov.in

5629 9341 4869

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बैंक ऑफ बड़ोदा
Bank of Baroda

नाम : रविशंकर दास

Name : Rabisankar Das

कर्मचारी सूच. क्र.

E.C. No. 120217

Rabisankar Das

जारीकर्ता अधिकारी

Issuing Authority: C.M. (Co-ord), KZ



Rabisankar Das

धारक के हस्ताक्षर

Signature of Holder

Rabisankar Das

Finders or Discoverers of this
lost item, please return to
C-26, G Block, Baroda-Kurla Complex, Mumbai 400 051, India
Phone : 91 22 6698 5196 Fax : 91 22 2652 5747
Name & Ph. Person of emergency contact :
Asst. General Manager (Security), Bank of Baroda, Baroda Corporate Centre
If found, please return to
91 22 6698 5196 or 91 22 2652 5747
K. Z

For: **Sukdeb Das**
Blood Group: **A+ve** **97336524591**
Race/Ethnicity: **Nil**
Identification mark: **A black mole in right chest**

BOB, Kolkata Zone, Plot No. 30/2 Block - GN, Sector - V, Salt Lake City, Kolkata - 700 091
Issuing Office

Rabisankar Das



REDMI NOTE 6 PRO
MI DUAL CAMERA

2021/9/11 14:27



11 Sep 2021 10:44:51 am
Satchasi Para