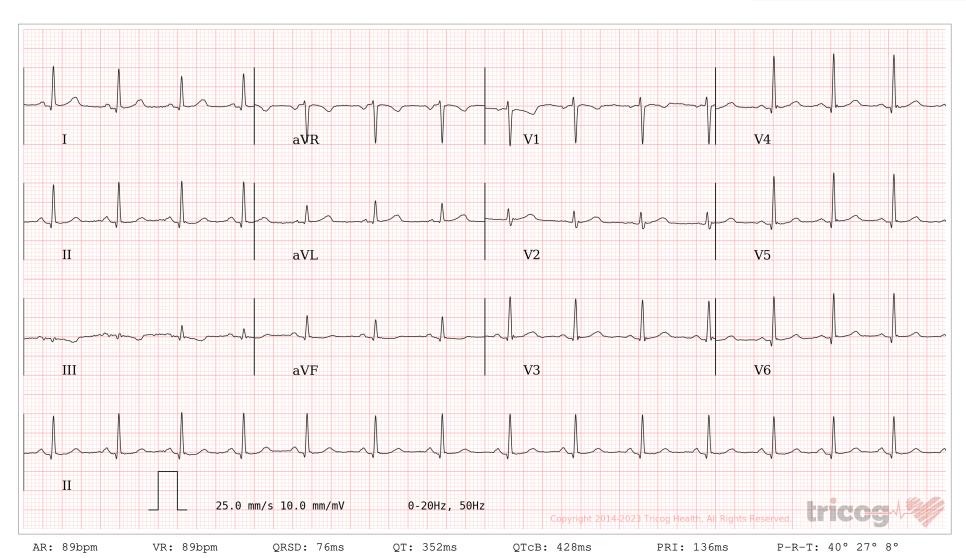
Chandan Diagnostic



Age / Gender: 33/Female Date and Time: 1st Oct 23 11:55 AM

Patient ID: CVAR0058822324

Patient Name: Mrs.POONAM KUMARI -BOBE44817



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

AUTHORIZED BY

REPORTED BY



Dr. Charit MD, DM: Cardiology Dr Arunkumar Kak

63382

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.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Registered On : 01/Oct/2023 11:26:20 Age/Gender : 33 Y 0 M 0 D /F Collected : 01/Oct/2023 14:12:58 UHID/MR NO : CVAR.0000042194 Received : 01/Oct/2023 14:13:15 Visit ID : CVAR0058822324 Reported : 01/Oct/2023 15:39:24

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Bl	ood			
Blood Group	В			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Complete Blood Count (CBC) * , Whole	e Blood			
Haemoglobin	11.50	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC) <u>DLC</u>	9,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Neutrophils) Lymphocytes Monocytes Eosinophils Basophils ESR	65.00 30.00 3.00 2.00 0.00	% % % %	55-70 25-40 3-5 1-6 <1	ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE
Observed Corrected PCV (HCT) Platelet count	20.00 10.00 36.50	Mm for 1st hr. Mm for 1st hr. %	< 20 40-54	
Platelet Count	1.98	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width) P-LCR (Platelet Large Cell Ratio)	nr nr	fL %	9-17 35-60	ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE









CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 : 01/Oct/2023 11:26:20 Registered On Age/Gender : 33 Y 0 M 0 D /F Collected : 01/Oct/2023 14:12:58 UHID/MR NO : CVAR.0000042194 Received : 01/Oct/2023 14:13:15 Visit ID : CVAR0058822324 Reported : 01/Oct/2023 15:39:24 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTM ENT OF HAEM ATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	3.78	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	96.60	fΙ	80-100	CALCULATED PARAMETER
MCH	30.40	pg	28-35	CALCULATED PARAMETER
MCHC	31.50	%	30-38	CALCULATED PARAMETER
RDW-CV	12.60	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	48.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	6,240.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	192.00	/cu mm	40-440	

S.N. Sinha (MD Path)









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Registered On : 01/Oct/2023 11:26:21 Collected Age/Gender : 33 Y 0 M 0 D /F : 01/Oct/2023 14:25:39 UHID/MR NO : CVAR.0000042194 Received : 01/Oct/2023 14:26:50 Visit ID : CVAR0058822324 Reported : 01/Oct/2023 15:23:08 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING, Plasma				
Glucose Fasting	70.60	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) 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 diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

Glucose PP	125.00	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>200 Diabetes	

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) 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 diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 : 01/Oct/2023 11:26:21 Registered On Collected Age/Gender : 33 Y 0 M 0 D /F : 01/Oct/2023 14:12:58 UHID/MR NO : CVAR.0000042194 Received : 02/Oct/2023 11:24:29 Visit ID : CVAR0058822324 Reported : 02/Oct/2023 15:28:12 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

GLYCOSYLATED HABMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	4.10	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	21.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	71	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 mnagement.

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

^{*}High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated VARIANT II TURBO 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





^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817

Registered On

: 01/Oct/2023 11:26:21

Age/Gender

: 33 Y 0 M 0 D /F

Collected

: 01/Oct/2023 14:12:58 : 02/Oct/2023 11:24:29

UHID/MR NO Visit ID

: CVAR.0000042194 : CVAR0058822324 Received Reported

: 02/Oct/2023 15:28:12

Ref Doctor

: Dr.MEDIWHEEL VNS -

Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

M EDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





^{*}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.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Registered On : 01/Oct/2023 11:26:21 Age/Gender : 33 Y 0 M 0 D /F Collected : 01/Oct/2023 14:12:58 UHID/MR NO : CVAR.0000042194 Received : 01/Oct/2023 14:13:15 Visit ID : CVAR0058822324 Reported : 01/Oct/2023 15:04:52 : Final Report Ref Doctor : Dr.MEDIWHEEL VNS -Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen)	9.00	mg/dL	7.0-23.0	CALCULATED
Sample:Serum				
Creatinine Sample:Serum	0.80	mg/dl	0.5-1.30 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid	2.60	mg/dl	2.5-6.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	13.90	U/L	<35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	6.30	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	26.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.60	gm/dl	6.2-8.0	BIURET
Albumin	4.00	gm/dl	3.4-5.4	B.C.G.
Globulin	2.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.54		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	142.70	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)	152.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	54.70	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	76	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline High	
			160-189 High > 190 Very High	
VLDL	21.64	mg/dl	10-33	CALCULATED
Triglycerides	108.20	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP









UHID/MR NO

Ref Doctor

Visit ID

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227

CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Age/Gender

: 33 Y 0 M 0 D /F

: CVAR.0000042194

: CVAR0058822324

: Dr.MEDIWHEEL VNS -

Registered On

: 01/Oct/2023 11:26:21

Collected : 01/Oct/2023 14:12:58

Received Reported : 01/Oct/2023 14:13:15 : 01/Oct/2023 15:04:52

Status

: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Unit Bio. Ref. Interval Method Result



S.N. Sinta

Dr.S.N. Sinha (MD Path)





Result



Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Age/Gender : 33 Y 0 M 0 D /F

Registered On Collected

: 01/Oct/2023 11:26:21 : 01/Oct/2023 14:12:58

Method

UHID/MR NO Visit ID Ref Doctor

Test Name

: CVAR.0000042194 : CVAR0058822324

Received : 01/Oct/2023 14:13:15 Reported : 01/Oct/2023 15:09:36

Bio. Ref. Interval

: Dr.MEDIWHEEL VNS -Status : Final Report

Unit

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

rest name	nesuit	Offit	bio. hei. iiilei vai	MELTIOU
URINE EXAMINATION, ROUTINE*	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.025			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		,	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
Curren	ADCENIT	0/	> 500 (++++)	DIRCTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++)	DIPSTICK
			1-2 (+++)	
			>2 (++++)	
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	8-10/h.p.f			MICROSCOPIC
The second second	The state of the s			EXAMINATION
Pus cells ·	4-5/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

Interpretation:

Sugar, Fasting stage

< 0.5 (+)0.5-1.0 (++)

ABSENT

gms%

(+++) 1-2

(++++) > 2

S.N. Sinta

Dr.S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817 Registered On : 01/Oct/2023 11:26:21 Age/Gender : 33 Y 0 M 0 D /F Collected : 01/Oct/2023 14:12:58 UHID/MR NO : CVAR.0000042194 Received : 01/Oct/2023 16:27:22 Visit ID : CVAR0058822324 Reported : 01/Oct/2023 17:09:39 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

98.30	ng/dl	84.61–201.7	CLIA
8.44	ug/dl	3.2-12.6	CLIA
2.360	μIU/mL	0.27 - 5.5	CLIA
	0.3-4.5 μIU/ı	mL First Trimest	ter
	0.5-4.6 μIU/1	mL Second Trim	ester
	0.8-5.2 μIU/1	mL Third Trimes	ster
	0.5-8.9 μIU/1	mL Adults	55-87 Years
	0.7-27 μIU/ı	mL Premature	28-36 Week
	2.3-13.2 μIU/r	nL Cord Blood	> 37Week
	0.7-64 μIU/1	mL Child(21 wk	- 20 Yrs.)
	1-39 μIU	J/mL Child	0-4 Days
	1.7-9.1 μIU/ı	mL Child	2-20 Week
	8.44	8.44 ug/dl 2.360 μIU/mL 0.3-4.5 μIU/n 0.5-4.6 μIU/n 0.8-5.2 μIU/n 0.5-8.9 μIU/n 0.7-27 μIU/n 2.3-13.2 μIU/n 0.7-64 μIU/n 1-39 μIU/n	8.44 ug/dl 3.2-12.6 2.360 μIU/mL 0.27 - 5.5 0.3-4.5 μIU/mL First Trimest 0.5-4.6 μIU/mL Second Trim 0.8-5.2 μIU/mL Third Trimest 0.5-8.9 μIU/mL Adults 0.7-27 μIU/mL Premature 2.3-13.2 μIU/mL Cord Blood 0.7-64 μIU/mL Child(21 wk 1-39 μIU/mL Child

- 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. Sinla

Dr.S.N. Sinha (MD Path)







Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.POONAM KUMARI -BOBE44817

Registered On

: 01/Oct/2023 11:26:22

Age/Gender UHID/MR NO : 33 Y 0 M 0 D /F

Collected Received : N/A : N/A

Visit ID

: CVAR.0000042194 : CVAR0058822324

Reported

: 01/Oct/2023 19:58:02

Ref Doctor

: Dr.MEDIWHEEL VNS -

Status : Final Report

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

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, SUGAR, PP STAGE, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



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 Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *

*Facilities Available at Select Location











Name of Company: Mediwheel

Name of Executive: Mus. Poonam Kumany

Date of Birth: 05 109 1 1990

Sex: Mate./ Pemale

Height: .1.4.5....CMs

Weight ...5.8...KGs

BMI (Body Mass Index): 27.6

Chest (Expiration / Inspiration) 91/ 93....CMs

Abdomen:9.0.....CMs

Blood Pressure: 0.0.../...6.4...mm/Hg

Pulse: 9.5.....BPM - Regular / Irregular

RR:Resp/Min

Ident Mark: Male on Right foot

Any Allergies: No

Vertigo: NO

Any Medications: NO

Arry Medications.

Any Surgical History: Gall Bladden Poblo ofended - 2020

Habits of alcoholism/smoking/tobacco:

Chief Complaints if any:

NO

Lab Investigation Reports:

NO

Eye Check up vision & Color vision: Normal & Power Glass - 10 years

Left eye: -01.25 D

Right eye: - 1 . 25 D





Near vision: N/6

Far vision: 6/6 & Glass

Dental check up :

Noumal

ENT Check up:

Noumal

Eye Checkup:

Nonmal

Final impression

Certified that I examined <u>Pocham</u> <u>Rumau</u> 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.

Client Signature :-

Signature of Medical Examiner

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

Place - VARANASI

nandan Diagnostic Cente 99, Shivaji Nagar, Mahmoorgan, Varanasi-221010 (U.P.) Phone No.:0542-2223232









भारत सरकार Government of India

भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

नामांकन अम/ Enrolment No.: 0619/71090/00143

To give giret! Poorarm Kurnari Ni/O: Vivek Kurnar H No 22/50 , vijay nagar colony chaturbhigpur chre,mightelarali Chandaul Uttar Pradesh - 232101 9668744666



आपका आधार क्रमांक / Your Aadhaar No.:

8648 0742 7469 VID: 9198 0121 0174 4251

मेरा आधार, मेरी पहचान



Sovernment of India



Date: 26:15:2014



gras grasti Poorsem Kumari una Refu/DOB: 05/09/1990 rifest/ FENALE

8648 0742 7469 VD: 9198 0121 0174 4251 त आधार, मेरी पहचान



B38/42/27, Mohinikunj, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude

25.305348°

LOCAL 11:39:35 GMT 06:09:35 Longitude

82.979030°

SUNDAY 10.01.2023 ALTITUDE 37 METER