ata Medical Center

Major Arterial Road (EW)
ewtown, Rajarhat, Kolkata - 700 160
L: + 91 33 66057000, Email : info@tmckolkata.com
ww.tmckolkata.com

TATA MEDICAL CENTER

Date: 20/07/2024

Department of Paediatrics Oncology

COST ESTIMATE FOR TREATMENT

Name	: Master. Alokendu Makar
MR No	: MR/24/011769
Age/Sex	: 10 Y 9 M / Child
Nationality	: Indian
Category	: General
Diagnosis	: BCP ALL
Duration of Treatment	: 1 Year
Prescribed Management	: Chemotherapy
Intent of treatment	: Curative
Doctor's Name	: Dr. Pritam Singha Roy
Estimated Expenditure	: Approx. Rs.12.00000/- For Chemotherapy

Total Estimated Expenditure : Approx. Rs. 12.00000.00 /- (Twelve Lakh INR Only)

Name of the authorizing Doctor
(In Capital Letter)

Authorised By
TATA Medical Center, Kolkata

Major General
Dr.Sanjay Kapoor,VSM(Retd)
Deputy Director-Medical
Prof Surgical oncology

Signature of the authorizing Doctor
Registration No:
Department of Paediatrics Oncology

Anyone willing to make any contribution/help towards the treatment of this patient is requested to provide the following:-

1. **Declaration letter must be attached with the cheque/DD along with the patient details-name and MR number.**
2. **The letter must carry the name of the individual/company and contact details.**
3. **The cheque/draft to be issued on 'Tata Medical Center'**

Disclaimer:This is an approximate estimate for the planned treatment. However, same may increase, in the eventuality of any complication or on detection/development of any incidental disease, as cost of extra stay, critical care, and expense of higher antibiotics and medicines including supportive care and additional investigations and procedures that may be needed to manage the complications.

आधार

भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Enrollment No. : 0667/00259/93442

To
ALOKENDU MAKAR

S/O Rabindranath Makar,
RAYAN,
RAYAN,
BARDDHAMAN,
VTC: Rayan, PO: Rayan,
Sub District: Burdwan - I, District: Barddhaman,
State: West Bengal, PIN Code: 713101,
Mobile: 9593418856

699368875

KF699368758FI

आपका आधार क्रमांक / Your Aadhaar No. :

3600 1902 6215

मेरा आधार, मेरी पहचान

भारत सरकार
Government of India

आधार

Issue Date: 05/01/2017

ALOKENDU MAKAR
DOB: 11/10/2013
Male

3600 1902 6215

मेरा आधार, मेरी पहचान

Government of India

AADHAAR

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं ।
- सुरक्षित QR कोड/ऑफलाइन XML/ ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें ।

नोट : बच्चे 15 वर्ष की उम्र होने पर बायोमेट्रिक सूचना अद्यतन कराएं ।

INFORMATION

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

Note : Children on attaining 15 years of age need to update biometric information.

- आधार देश भर में मान्य है ।
- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है ।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
- आधार को अपने स्मार्ट फोन पर रखें, **mAadhaar App** के साथ।

- 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.

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Print Date: 25/09/2021

Address: S/O Rabindranath Makar, RAYAN, RAYAN, BARDDHAMAN, Rayan, Barddhaman, West Bengal, 713101

3600 1902 6215

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

C-2
B-wt-3

DEPARTMENT OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF WEST BENGAL
BURDWAN MEDICAL COLLEGE & HOSPITAL
Shyamsayar (West), Rajbati, Purba Bardhaman, Pin. 713101

Discharge Certificate Left Against Medical Advice

Page No. 1

Discharge No. ALOKENDU MAKAR
Date of Discharge
Female
Patient Category : Free/Paying/Cabin
Patient Name BWNMR...
(10-06-2024) (11:13AM)
Sex Age Yrs Months Days
Patient Srl. No. RAYAN
Patient Registration No. 2/7/24
Address Bardhaman
West Bengal India
Municipality / V... RABINDRANATH MAKAR
Post Office
Police Station Unit - C2 (Paediatric) / Prof. Dr. Kamal Lal Barik/Dr Asst. Prof Dr. Ujjal Mondal /Dr.(RMO-CT)/Dr. ... Kanti Das/Dr.SR Dr. Shilpi Ghosh
District
State
Religion Hindu
Father's Name
Husband's Name S.N.M.& P.I.C.U Ward
Doctor/Unit Free
Phone/Mobile No.
Bed No
Bed Type Health Id
Ward Name
Health Id Number
Final Diagnosis

Referred Out Case

Referred To
Δ (?) Lymphoma · ALL-L2
Date Time Reason :

In case of Confinement
Delivery Date & Time :
Mode of Delivery : ND/ECL/LSCS/With Forceps/Without Forceps
Delivery Status
No. of Child
Antenatal Care Taken : Yes / No

In case of Surgery
Surgery Date & Time :
Type of Surgery
Surgery Status
~~Ixx~~: Multiple ~~glandular~~ nodular swelling all over the body. With h/o Fever on and off.

Anesthesia Details

On Adm
A|C|C
LBOT (+)
...atomegaly (+)
...lenomegaly (+)
petechiae.
...

Treatment
- Inj. Ceftriaxone
- Inj. Vancomycin
- One Unit PRBC has been transfused
- Two unit Platelet has been transfused

Investigation Done
Test Name
Comments

Medicine Details
Name No. of Days Comments

ADVICE

Details of Baby
Birth Date : Birth Time :
Disc No. : Sex :
Birth Wt. :

Advice for Baby

Patient's vital is unsta... ~~stable~~ and unfit for discharge. But p... need discharge against medical advice.

✓ Rabindranath Makar

Baby Checked and Discharged ....
Signature ....
Date .... Time ....

Counter Signature of the Visiting Staff

Signature of the Medical Officer

TIRUPATI DIAGNOSTIC CENTRE

R.B. Ghosh Road, Khoshbagan, Burdwan-713101
M - 9832161526 WhatsApp - 7384740403
e-mail : tdcwecareforu@gmail.com

DC

ID NO	83	DATE	01-07-2024		
NAME	ALOKENDU MAKAR	AGE(YRS)	11	SEX	MALE
REF. BY	Dr. B.M.C.H , .				

REPORT ON EXAMINATION OF BLOOD

Haemoglobin 4.9* gm/dl.

Normal reference Values Hb
[But varies with height and weight of the patient]
Females :12-16 g/dl / Males :12-18 g/dl

WBC Count: 1,17,620*/cumm

Reticulocyte count : 4.0 /100RBC

RBC count: 1.42 million/cumm

Platelets Count: 24,000*/cumm .

PCV	14.8	%
MCV	104.4	fl
MCH	34.2	pg
MCHC	32.8	gm/dl
RDW –CV	17.6	%
RDW-SD	72.7	fl
PDW-CV	10.0	%
PDW-SD	6.10	fl

WBC: ***DC:*** smears show absolute increase in lymphoid series with maturation skip with blast cells seen >20 % with cleaved cells seen.

Peripheral Smear:R.B.C.: Normocytic normochromic Anae...

Size of Platelet:

MPV	8.60	fL	6.5-12.0
P-LCC	4.00	$10^3/\mu L$	30-90
P-LCR	17.8	%	11.0-45.0

Impression : **suggestive of**

1. ***ALL L2***
2. ***LYMPHOMA SPILLAGE***

Consult any hematologist for confirmation.
Slide enclosed.
Histogram enclosed
Out side sample.

To appreciate platelet aggregation, direct slide is needed. Please send a direct slide for confirmation.
However, No platelet aggregation is appreciated in the given EDTA slide.

Checked by

Dr. Pallabhi Maji
MBBS (Cal), MD(Path) (Manipal)

TATA MEDICAL CENTER

MC-2842

Tata Medical Center

14 MAR (EW) , Newtown, Kolkata -700 160
Phone:+91 33 6605 7000,7222 , Email : info@tmckolkata.com
Website: www.tmckolkata.com

Department of Haemato Pathology

Run Date: 07/07/2024 9:52:35

MR No.	: MR/24/011769	**Request No.**	: SO/24/0575036
Name	: Master Alokendu Makar	**Patient No.**	: IP/24/013248
Age	: 10 Y 8 M	**Sex**	: Male
Patient Location	: P2F2G1/P2F2GWR/PEDG23	**Reported on**	: 06/07/2024 11:53:20
Ref. Doctor	: Dr. Arpita Bhattacharyya	**Lab Ref.No.**	: HP/24/071905
Age at time of Sample Collection	: 10 Y 8 M		

Specimen : *PERIPHERAL BLOOD (SE/24/211502)*

Collected On : *05/07/2024 15:50:47*
Received On : *05/07/2024 16:27:12*

IMMUNOPHENOTYPING (FLOWCYTOMETRY)

Parameter	Result	Biological Ref. Interval	Units
FLOWCYTOMETRY	CD45/SSC scatter plot shows a population of cells (75% maximum gated among a total of 100,000 events acquired) with low side scatter and neg to dim CD45 expression in the blast window. On gating and further analysis, these cells express the following immunophenotyping findings -		
CD45	neg to dim		
CyMPO	neg		
CD117	neg to dim		
CD13	neg		
CD15	neg		
CD33	neg to dim		
CyCD79a	mod		
CD19	bright		
CD10	bright		
CD20	bright		
Surface CD22	mod to bright		
CyCD3	neg		
CD7	neg		
CD34	neg to dim		
TdT	dim		
CD123	bright		
CD38	neg		
CD73	bright		
CD81	dim		
CD58	bright		
CD66	bright		
CRLF2	mod		

*This report is electronically generated *

*Results relate only to the items tested *

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MC-2542

Tata Medical Center
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Department of Haemato Pathology

Run Date: 07/07/2024 9:52:35

MR No.	: MR/24/011769		
Name	: Master Alokendu Makar	**Request No.**	: SO/24/0575036
Age	: 10 Y 8 M	**Patient No.**	: IP/24/013248
Patient Location	: P2F2G1/P2F2GWR/PEDG23	**Sex**	: Male
Ref. Doctor	: Dr. Arpita Bhattacharyya	**Reported on**	: 06/07/2024 11:53:20
Age at time of Sample Collection	: 10 Y 8 M	**Lab Ref.No.**	: HP/24/071905

Parameter	Result	Biological Ref. Interval	Units
Remarks :	Instrument used : BD FACSLyric (BD FACSuite v1.5).		
	Protocol : Stain - Lyse - Wash		
	The gated cells in the blast window expressed TdT, CD34, CD19, CD10, CD20, cCD79a, sCD22, CD73, CD81, CD123, CD66c, CD58, CD33, CD117 and CRLF2.		
	These cells gated are negative for cMPO, CD38, CD13, cCD3, CD15, CD7 and CD371.		
	Impression: The immunophenotypic features are consistent with **B Cell Precursor-Acute Lymphoblastic Leukemia [BCP-ALL].**		
	Ploidy (Flow Cytometry) = Diploid(DI=1.03)		
	Note: Kindly correlate with PB/ BM morphology, cytogenetics and molecular studies.		
Authorised By :	Dr. Sushant Sonu Vinarkar		

:- End of Report :-

"This report is electronically generated "

"Results relate only to the items tested "

TATA MEDICAL CENTER

MC-2642

Tata Medical Center

14 MAR (EW) , Newtown, Kolkata -700 160
Phone +91 33 6605 7000,7222 , Email : info@tmckolkata.com
Website: www.tmckolkata.com

Department of Haemato Pathology

Run Date: 07/07/2024 9:52:35

MR No.	: MR/24/011769	**Request No.**	: SO/24/0575036
Name	: Master Alokendu Makar	**Patient No.**	: IP/24/013248
Age	: 10 Y 8 M	**Sex**	: Male
Patient Location	: P2F2G1/P2F2GWR/PEDG23	**Reported on**	: 06/07/2024 11:53:20
Ref. Doctor	: Dr. Arpita Bhattacharyya	**Lab Ref.No.**	: HP/24/071905
Age at time of Sample Collection	: 10 Y 8 M		

Parameter	Result	Biological Ref. Interval	Units

Remarks : Instrument used : BD FACSLyric (BD FACSuite v1.5).

Protocol : Stain - Lyse - Wash

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These cells gated are negative for cMPO, CD38, CD13, cCD3, CD15, CD7 and CD371.

Impression: The immunophenotypic features are consistent with **B Cell Precursor-Acute Lymphoblastic Leukemia [BCP-ALL].**

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Note: Kindly correlate with PB/ BM morphology, cytogenetics and molecular studies.

Authorised By : Dr. Sushant Sonu Vinarkar

-: End of Report :-

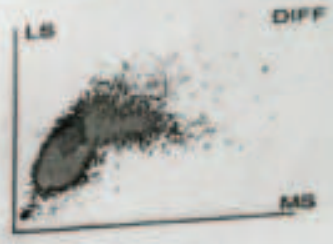
TIRUPATI DIAGNOSTIC CENTRE

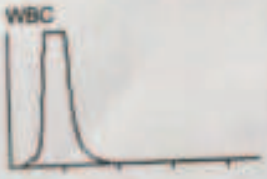
: ALAKENDU
ame:
der:
agnosis:

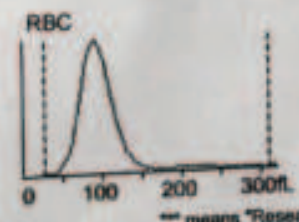
Sample Type:
Department:
Patient ID:

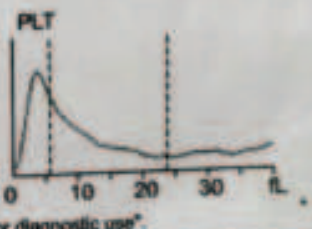
Sample ID: 83
Run Time: 01-07-2024 16:07
Age:

Parameter	Result		Ref. Range	Unit
1 WBC	117.62	↑	3.50-9.50	10^3/uL
2 *cWBC	117.60	↑	3.50-9.50	10^3/uL
3 Neu%	3.5	↓	40.0-75.0	%
4 Lym%	91.8	↑	20.0-50.0	%
5 Mon%	3.3		3.0-10.0	%
6 Eos%	0.1	↓	0.4-8.0	%
7 Bas%	1.5	↑	0.0-1.0	%
8 Neu#	4.12		1.80-6.30	10^3/uL
9 Lym#	107.74	↑	1.10-3.20	10^3/uL
10 Mon#	3.88	↑	0.10-0.60	10^3/uL
11 Eos#	0.12		0.02-0.52	10^3/uL
12 Bas#	1.76	↑	0.00-0.06	10^3/uL
13 HGB	4.9*	↓-	11.5-17.5	g/dL
14 RBC	1.42*	↓	3.80-5.80	10^6/uL
15 HCT	14.8	↓	35.0-50.0	%
16 MCV	104.4	↑	82.0-100.0	fL
17 MCH	34.2	↑	27.0-34.0	pg
18 MCHC	32.8		31.6-35.4	g/dL
19 RDW-CV	17.6	↑	11.0-16.0	%
20 RDW-SD	72.7	↑	35.0-56.0	fL
21 PLT	[redacted]	↓	125-350	10^3/uL
22 MPV	8.6*		6.5-12.0	fL
23 PCT	0.021	↓	0.108-0.282	%
24 PDW-CV	10.0		10.0-17.9	%
25 PDW-SD	6.1	↓	9.0-17.0	fL
26 *ALY#	12.52	↑	0.00-0.20	10^3/uL
27 *ALY%	10.6	↑	0.0-2.0	%
28 *LIC#	0.86	↑	0.00-0.20	10^3/uL
29 *LIC%	0.7		0.0-2.5	%
30 *NRBC#	0.022		0.000-9999.999	10^3/uL
31 *NRBC%	0.02		0.00-9999.99	%
32 *Mentzr	73.45			
33 *RDWI	1294.77			
34 P-LCR	17.8		11.0-45.0	%
35 P-LCC	4	↓	30-90	10^3/uL









*** means "Research use only, not for diagnostic use".

Submitter:
Sampling Time:
Report Time: 01-07-2024 16:09

Operator: 1234
Delivery Time:
Remarks:

Approver:
Validated Time:

*The Report is responsible for this sample only. If you have any questions,please contact us in 24 hours.

TATA MEDICAL CENTER

Tata Medical Center
14 MAR (EW), Newtown, Kolkata 700 160
Phone +91 33 6605 7000 7222 Email: info@tmckolkata.com
Website: www.tmckolkata.com

Daily Nutrition Planning Report

Run Date: 12/07/2024 13:54:52

MR No.	: MR/24/011760	**Name**	: MASTER ALOKENDU MAKAR
Patient	: IP/24/013248	**Sex**	: MALE
Age	: 10 Y 9 M		
Address	: [illegible] West Bengal [illegible]		
Assessment Date	: 12/07/2024	**Patient Bed**	: [illegible]

Weight (kg)	: 32.5	**Height (cm)**	: 144.6	**BMI(kg/m2)**	: 15.5
UBW(kg)	: NA	**IBW Range (kg)**	: 41.4 - 51.47	**Activity Pattern**	: Sedentary

Predictive Formula : Kcal/ kg

Patient Type : Assessment

Patient Dept : Paediatric

Calorie(Kcal) : 50

Diagnosis :

-

Nutritional History

Diabetes Mellitus :	No	Weight Change:	Not known
Food Allergy	NO ALLERGY		
Nutrition intake as per recall:	Inadequate	1280 kcal, 38gms protein	50-75% of need

Nutritional Impact Symptoms

Nausea :	No	Abdominal Pain	No	Odynophagia :	No
Vomiting	No	Diarrhoea	No	Dysphagia	No
Constipation :	No			Hiccups	No

Others

Nutrition Advice:

12/07/2024- On recall intake meets ~70% needs

ADVICE

Following diet plan for daily intake

-Increase the amount cereals

-50gms pulses and products

-1 medium bowl cooked vegetables 3 times in a day

-1 whole fruit

-2 egg

-300ml milk/curd

-Chenna from 200ml milk

-20gms soybean

-5tsp cooking oil

-2 tsp ghee/butter

Will [illegible], if discharge will review in nutrition OPD once a week.

- ভাত, রুটি, মুড়ি, চিঁড়ে, [illegible] বাড়িয়ে খাও,
- ৫০ গ্রাম ডাল বা ডাল থেকে তৈরি [illegible]
- ২ টো ডিম দিন
- ২০ গ্রাম সয়াবিন
- ৩০০ মিলি দুধ / দই
- দুধের ২০০ মিলি ছানা,
- ১ টা গোটা ফল
- সবজি [illegible] দিনে ৩ বার
- ৫ চামচ তেল
- ২ চামচ ঘি/মাখন

Modes of Nutritional Intervention :

Oral

Nutritional Information :

Regime Plan :

Total Estimated Energy Requirement(Kcal) : 1580

Total Protein (g/Day)	: 60	**Total Carbohydrate (g/Day)**	: [illegible]
Total Fat (g/Day)	: 60	**Total Energy (Kcal/Day)**	: [illegible]

2024/7/13 18:27

Issue Date: 21/11/2013

No. 200651348/BC/2013

Form - 5 [Rule 9 of the W.B.R.B.D. Rules 2000]

Govt. of West Bengal. Department of Health & Family Welfare

Name of the Organisation issuing Certificate : **Gobardanga Municipality**

BIRTH CERTIFICATE

(Issued u/s. 12/17 of the RBD Act. 1969 and Rule 9/14 of the WBRBD Rules 2006)

This is to certify that the following information has been taken from the original record of births which is in the register for (Local Area) : Gobardanga Municipality

of Mouza P.S.:Block North 24 Parganas District of West Bengal.

Name of the Child :	**ALOKENDU MAKAR**	Sex (Male/Female) :	**MALE**
Date of Birth :	11/10/2013	Place of Birth :	EDEN NURSING HOME, GOBARDANGA COLLEGIATE SCHOOL ROAD,NORTH 24 PARAGANAS, W.B,PIN-743253
Name of Father :	RABINDRA NATH MAKAR	Name of Mother :	PAPIYA MAKAR
Address of Parents at the time of Birth of the Child :	VILL + PO :- RAYAN PS :- SURDWAN DIST :- SURDWAN		
Permanent Address of Parents :	VILL + PO :- RAYAN PS :- SURDWAN DIST :- SURDWAN		
Registration No :	WB_BR_2013/20065/1/248	Date of Registration :	21/11/2013
Remarks (if any) :	APPROVED		

Ensure registration of every birth & death

Signature of Dealing Assistants

21.11.13

Signature of Issuing Authority with date

21.11.2013

Registrar of Birth & Deaths
GOBARDANGA MUNICIPALITY

B cell High Risk : Induction

Name	ALOKENDU MAKAR	MR No	24011789	ASVIIA
DOB	11/10/2013	Age		10 yr 9 month
Risk	BHR	History		Ph+ ECP ALL
Ht (cm) 149		Wt (kg)	34.1	1.19

Drugs			Prednisolone (PO)	Dexa (PO)	VCR (IV)	MTX (IT)	PEG Asnase (IM)	Decno (IV)
Dose			60 mg/sqm	10 mg/sqm	1.5 mg/sqm	As per age	1500 IU/sqm	25mg/sqm
Calculated Dose			70	12	1.5	12	1800 IU	30
Wk	Day	Date	Day	mg	mg	mg	mg	IU	mg
1	1	7/7/24	Sun	✓					
	2	8/7/24	Mon	✓					
	3	9/7/24	Tue	✓					
	4	10/7/24	Wed	✓					
	5	11/7/24	Thu	✓					
	6	12/7/24	Fri	✓					
	7	13/7/24	Sat	✓					
2	8	14/7/24	Sun		✓				
	9	15/7/24	Mon		✓		✓		
	10	16/7/24	Tue		✓	✓		✓	✓
	11	17/7/24	Wed		✓				
	12	18/7/24	Thu		✓				
	13	19/7/24	Fri		✓				
	14	20/7/24	Sat						
3	15	21/7/24	Sun						
	16	22/7/24	Mon				✓		
	17	23/7/24	Tue						
	18	24/7/24	Wed						
	19	25/7/24	Thu						
	20	26/7/24	Fri						
	21	27/7/24	Sat						
4	22	28/7/24	Sun						
	23	29/7/24	Mon						
	24	30/7/24	Tue						
	25	31/7/24	Wed						
	26	1/8/24	Thu						
	27	2/8/24	Fri						
	28	3/8/24	Sat						
5	29	4/8/24	Sun						
	30	5/8/24	Mon						
	31	6/8/24	Tue						
	32	7/8/24	Wed						
	33	8/8/24	Thu						
	34	9/8/24	Fri						
	35	10/8/24	Sat						

BP/CBG to be checked and recorded in induction monitoring sheet on every Asparaginase day and during clinic visits at minimum

1. Prednisolone- In 3 divided dose; maximum dose upto 120mg per day
2. Dexamethasone - In 2 divided dose; maximum dose upto 20mg per day
3. Vincristine- To be given IV slow push maximum single dose upto 2mg
4. ITMTX : intrathecal Methotrexate: <2 yrs = 8 mg, 2-2.99 yrs = 10 mg, >=3 yrs = 12 mg
5. Daunorubicin- in 100mL 0.9% NaCl infused over 1 hour
6. Liposomal amphotericin B 2.5 mg/kg/day, IV, in 5% dextrose over 1 hour, twice a week
5. Cotrimoxazole 480 mg

IT Scheduled on	IT Given on	IT given by (signature)	
15/7/24	15/7/24	Avadhana	
22/7/24	22/7/24	Dr. Shashank	
30/7/24			
Peg-Asparaginase 1	Triplex/ik day 14	Peg-Asparaginase 2	
Date 16/7/24	Date 30/7/24	Date 30/7/24	13/8/24

2024/7/29 20:23

ভারত সরকার
Government of India

Rabindranath Makar
Father : Samarendranath Makar

জন্মতারিখ/DOB: 13/01/1984
পুরুষ / Male

6363 8063 0021

আধার – সাধারণ মানুষের অধিকার

ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ
Unique Identification Authority of India

আধার

ঠিকানা:, রায়ান, রায়ান, বর্ধমান
রায়ান, রায়ান, বর্ধমান, পশ্চিম বঙ্গ

Address: RAYAN, RAYAN
BARDDHAMAN, Rayan
Barddhaman, Rayan, West
Bengal, 713101

6363 8063 0021

2024/7/29 18:50

चेतावनी

धोखेबाजों से देश में अथवा विदेश से मिलने वाले फर्जी प्रस्ताव/संदेश/एसएमएस, जैसे लॉटरी विजेता, सस्ता फंड प्रस्ताव, नौकरी के प्रस्ताव, छात्रवृति के प्रस्ताव, उत्प्रवास वीसा के प्रस्ताव, विदेशी प्रतिष्ठित विश्वविद्यालयों में प्रवेश के प्रस्ताव और ऐसे ही अन्य प्रकार के फर्जी प्रस्तावों से सावधान रहें।

Warning

Beware of fictitious offers, messages/SMS about lottery winnings, cheap fund offers, employment offers, scholarship offers, offer of emigration visas, offer of admission to reputed universities abroad and similar such offers from fraudsters either within the country or from abroad.

2024/11/27

बैंक ऑफ़ इंडिया

Bank of India

Br. Name :	KAYAN	Occupation :	PVT EMPLOYEE
Br. Address :	KAYAN HIGH SCHOOL, PREMISES,AT & PO KAYAN WEST BENGAL, BURDWAN, WEST BENGAL, 713101	Address :	S/O SAMARENDRANATH MAKAR KAYAN BURDWAN BURDWAN, WEST BENGAL 713101 WEST BENGAL INDIA
Br. Tel. :	0342 2623151		
Br. Email :	Kayan.Howrah@bankofindia.co.in		
IFSC Code :	BKID0004305	Operational Inst:	SELF
MICR Code :	713013615	Nominee :	PAPIYA SARA (MAKAR)
Customer Id :	107848399	A/C Open Dt.:	06-03-2018
Account No. :	430510110002686	Scheme Desc:	SAVINGS BANK GENERAL
Name :	[illegible] NARENDRANATH MAKAR	Scheme Code:	SB101
		Spl. Charge Code:	002 - Star Surakshe KB
		Accidental death insurance cover :	Available
		*T&C Apply	
For your queries / enquiry		Grievance redress Officer,Ph:	