



## MISSION DIRECTOR NATIONAL HEALTH MISSION, J&K

Jammu Office: Regional Institute of Health & Family Welfare, Nagrota, Jammu.  
Fax: 0191-2674114; Telephone: 2674244, Pin: 181221

Kashmir Office: J&K Housing Board Complex, Chanapora, Srinagar. Pin: 190015  
Fax: 0194-2430359; Telephone: 2431167, e-mail: [mdnrhmjk@gmail.com](mailto:mdnrhmjk@gmail.com)

NHM Help Line for Jammu Division 18001800104; Kashmir Division 18001800102

Director  
Post Graduate Institute of Medical Education &  
Research, Chandigarh – 160012

Speed Post

No: SHS/NHM/J&K/ARSH/12012-20

Dated: 25/10/2014

Sub:- Financial Assistance in favour of Ms. Shalini Changotra D/o Sh. Jagdish Raj age 07 yrs R/o Chak Sajjan, District Kathua, J&K suffering from Tetralogy of Fallot.

Sir,

Kindly find enclosed herewith the Demand draft amounting to Rs. 106,000/- (Rupees one lakh Six Thousand only) bearing No.075639 dated: 20/10/2014 issued in favour of Director, PGIMER, Chandigarh payable at Chandigarh on account of the charges for the treatment of Ms. Shalini Changotra D/o Sh. Jagdish Raj age 07 yrs R/o Chak Sajjan, District Kathua, J&K suffering from Tetralogy of Fallot and is under treatment at your Institution in the Department of Cardiology.

The said amount has been released as per the estimate certificate communicated to this office vide No. CVC No./PCC No 201403742098 dated 09/08/2014 and the u/s shall further reimburse the cost of treatment if it exceeds beyond the estimated amount. The beneficiary has been provided the financial assistance by the State Health Society, NRHM, J&K Govt. Health & Medical Education Department, under the centrally sponsored School Health Programme/ Rashtriya Bal Swasthya Karyakaram (RBSK). The above grant in aid sanctioned is exclusively meant for the treatment of the above mentioned beneficiary and the funds sanctioned shall be utilized as per the guidelines issued by the Ministry of Health & Family Welfare, Govt. of India, New Delhi after observing all codal formalities.

Further, you are also requested to kindly provide the utilization certificate of the funds to this office in this regard after the procedure is conducted.

Yours Sincerely

Enclosure: As stated above.

*(Dr. Yaslipal Sharma)*  
Mission Director  
NHM, J&K.

Copy for information to the:

1. Commissioner/Secretary to Govt. Health & Medical Education Deppt., Civil Sect J&K Srinagar.
2. District Development Commissioner Kathua.
3. Chief Medical Officer, Kathua.
4. FA/CAO, NHM- J&K.
5. Programme Manager Child Health & RBSK, NHM J&K.
6. Programme Manager ARSH, NHM J&K.
7. Ms. Shalini Changotra D/o Sh. Jagdish Raj age 07 yrs R/o Chak Sajjan, District Kathua, J&K.
8. Office file.