BAREILLY INTERNATIONAL UNIVERSITY

(Established Under Govt. of U.P. Act 26 of 2016)
Rohilkhand Medical College Campus, Pilibhit Bypass Road, Bareilly-243006 (U.P.) INDIA
Phone: 0581-2526011-12, Fax: 0581 - 2303345
Email: info@rmchbareilly.com, info@biu.edu.in Website: www.biu.edu.in

Sanction Letters of Consultancy

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

TEERTHANKER MAHAVEER DENTAL COLLEGE & RESEARCH CENTRE
DEPARTMENT OF ORAL & MAXILLOFACIAL PATHOLOGY
BAGARPUR, DELHI ROAD, MORADABAD, UP, INDIA 244001

To,

The Head of the Department

Dept of Oral pathology & Microbiology

IDS Bareilly

Date: 26/05/2023

Subject: Requirement of tissue sections

Respected Sir,

This is to inform you that my students are doing Dissertation titled

1. Dr Nitin Kumar – Thesis Topic : Caveolin -1 Expression in Dentigerous Cyst, OKC & Ameloblastoma
2. Dr Ashish Kumar – Thesis Topic: Expression of Carbonic Anhydrase IX in Oral Squamous Cell Carcinoma and Oral Submucous Fibrosis
3. Dr Anjali – Thesis Topic: Immunohistochemical evaluation of EBV encoded LMP -1 in Oral Epithelial Dysplasia and Oral Squamous Cell Carcinoma

I kindly request you to provide unstained sections for the below mentioned for the purpose of IHC and H & E staining.

S.No.	Name of student	Lesion	No. of lesion required
1	Dr Nitin Kumar	Dentigerous cyst	20
		Odontogenic Keratocyst	20
		Ameloblastoma	20
2	Dr Ashish Kumar	Oral Submucous Fibrosis	23
		Oral Squamous Cell carcinoma	12
3	Dr Anjali	Oral Epithelial Dysplasia	14
		Oral Squamous Cell carcinoma	6

I am highly obliged for the same.

Thanking you,

Yours sincerely

Dr. Meghanand T Nayak
Prof. & Head
Dept. of Oral and Maxillofacial Pathology
TMDCRC

DR. MEGHANAND T NAYAK
BDS, MDS
PROF. AND HEAD
DEPT. OF ORAL AND MAXILLOFACIAL PATHOLOGY
TEERTHANKER MAHAVEER DENTAL COLLEGE AND RESEARCH
TEERTHANKER MAHAVEER UNIVERSITY
Mob.: +919935008888

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

No. 521340

INSTITUTE OF DENTAL SCIENCES

OPD

Card No. 776359 Date 31.5.23

Received from Dr. Nitin

Rs. in words Twenty three thousand only

For block & Slider

Rs. 23,000/-

Signature

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337913FC8D793F2708FC9D887F06B89F41968932532600EEC86FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

No. 526654

INSTITUTE OF DENTAL SCIENCES
OPD

Date 21.6.23

Card No. 726359

Received from Dr. Nitin

Rs. in words Twenty Three thusend and only

For 230 Slides (Histo Path) Bal Paid

Rs. 23000/-

Signature

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337911F3C6D793F2708FC9D687F06B89F41968932532600EECB6FEC22C0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

To,

The Principal,

Institute of Dental Sciences,

Bareilly International University,

Bareilly.

Subject: Request for thesis testing.

Respected Sir,

This is in concern with my thesis about **"Evaluating the marginal adaptation of different pattern materials on type IV gypsum dies: An in vitro study".** The study includes 30 samples of three different pattern material groups for which the marginal adaptation has to be observed under optical stereozoom microscope at three different intervals i.e. at 1hr, 6hrs and 24hrs.

I therefore humbly request you to allow me to use the optical stereozoom microscope for the thesis work.

Thanking you,

Yours sincerely,

Dr. Shivangi Gupta
PG 2nd year
Department of prosthodontics
and crown & bridge,
Kothiwal Dental College and Research Centre,
Moradabad.

Dr. Swatantra Agarwal
Principal & Head of Department
Kothiwal Dental College and Research Centre,
Moradabad.

Forwarded to the HOD, Dept of Oral Pathology for needful will be the need for.

10/07

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: O=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

INSTITUTE OF DENTAL SCIENCES, BAREILLY

Thesis testing on "**An evaluation of the marginal adaptation of different pattern material on type IV gypsum dies: an in vitro study**" was conducted in Institute of dental sciences, Bareilly.

30 samples marginal adaptation evaluated at 1 hour, 6 hours, 24 hours.

Following are the readings obtained.

INLAY WAX

1 HOUR (*μm*)	6 HOURS (*μm*)	24 HOURS (*μm*)
163.3	271.2	360.6
151.0	209.6	394.5
197.2	261.9	354.4
237.6	331.4	431.7
339.0	314.3	496.1
289.7	382.7	505.4
437.6	468.2	566.9
641.0	662.6	862.9
366.7	453.0	425.3
514.6	566.9	613.6

AUTOPOLYMERISING RESIN

1 HOUR (*μm*)	6 HOURS (*μm*)	24 HOURS (*μm*)
240.4	268.1	271.2
422.2	431.4	434.5
514.6	527.0	533.1
335.9	345.1	354.4
363.6	422.2	428.4
379.0	382.1	385.2
345.1	351.3	357.2
585.5	409.9	468.4
545.5	610.2	548.5
468.4	477.7	462.2

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

No. 530663

INSTITUTE OF DENTAL SCIENCES
OPD

Card No. 782423 Date 12.7.23

Received from Shivangi

Rs. in words Six thousand only

For Thesis Stereo Microscope (Oral Path.)

30 x 200

Rs. 6000/-

Signature

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

TEERTHANKER MAHAVEER DENTAL COLLEGE & RESEARCH CENTRE
DEPARTMENT OF ORAL & MAXILLOFACIAL PATHOLOGY

BAGARPUR, DELHI ROAD, MORADABAD, UP, INDIA 244001

From,
Dr Shagun Chitkara and Dr mithilesh kumar
Dept of Oral Pathology & Microbiology
Teerthanker Mahaveer Dental College & Research CentreTMU
Moradabad

To,
The Head of the Department
Dept of Oral pathology & Microbiology
Institute of dental sciences Bareilly

Subject: Requirement of tissue

This is |to informi you that I Dr. shagun chitkara is doing a Dissertation titled "A compararive evaluation of expression of: aquaporin3 in dentigerous cyst and ameloblastoma".

I Dr. Mithilesh kumar is doing a Dissertation titled" evaluation of mast cell and vegf in different grade of OSCC"

I kindly request you to provide unstaied sections

for the below mentioned for the purpose of IHC and H & E staining.

S.no	Lesion	No.of lesion required
1	**Unicystic Ame loblast:oma**	**13**
2	**Poorely diff.oscc**	**14**

I am highly obliged for the same.

Thanking you

Yours Sincerely

Mithilesh 11/7

Forwarded to Principal for needful.

11/7/22

Kindly do the needful.

Dr. Meghanand T Nayak
Prof. & Head
Dept. of Oral and Maxillofacial Pathology
TMDCRC

DR. MEGHANAND T NAYAK
BDS, MDS
PROF. AND HEAD
DEPT. OF ORAL AND MAXILLOFACIAL PATHOLOGY
TEERTHANKER MAHAVEER DENTAL COLLEGE AND RESEARCH CEL
TEERTHANKER MAHAVEER UNIVERSITY
Mob.: +919935008888

11/7/22

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

TEERTHANKER MAHAVEER DENTAL COLLEGE & RESEARCH CENTRE
DEPARTMENT OF ORAL & MAXILLOFACIAL PATHOLOGY

BAGARPUR, DELHI ROAD, MORADABAD, UP, INDIA 244001

To,
The Head of the Department
Department of Oral Pathology & Microbiology
Institute Of Dental Sciences,Bareilly

Subject: Requirement of tissue sections

Dear Sir,

I would like to request to you that our post graduate students require tissue sections for their thesis work. I would be highly grateful if you provide us with these tissue sections for which they will do the required payment as instructed.

Thanking you in anticipation,

Date - 29/10/2021

Yours sincerely

Dr. Meghanand T Nayak
Prof & Head
Dept. of Oral and Maxillofacial Pathology
TMDCRC

DR. MEGHANAND T NAYAK
BDS, MDS
PROF. AND HEAD
DEPT. OF ORAL AND MAXILLOFACIAL PATHOLOGY
TEERTHANKER MAHAVEER DENTAL COLLEGE AND RESEARCH CEN
TEERTHANKER MAHAVEER UNIVERSITY
Mob.: +919935008888

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

To,

The Head of the Department,

Oral and Maxillofacial Pathology and Microbiology,

IDS, Bareilly, U.P.

Dated: 17th July, 2021

Subject: Seeking permission for histopathological slides.

Respected sir,

I, Dr. Arya Jyoti, 2nd year PG from the department of Oral and Maxillofacial Pathology and Microbiology, Kothiwal Dental College and Research Centre would like to seek your kind permission for histopathological slides of a few cases which are needed for the completion of my Thesis.

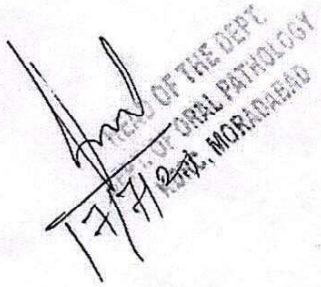
Therefore, I request you to kindly provide the slides for the same.

Thanking You,

Yours obediently,

Dr. Arya Jyoti

(PG IInd Year).



SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

The Head of the Department,

Department of Oral Pathology and Microbiology,

Institute of Dental Sciences, Bareilly.

SUB: Request to issue the tissue slides.

Respected sir,

With due regards and respect, I, Dr Minha Majeed Kak, Post graduate trainee, Department of Oral & Maxillofacial Pathology from Kothiwal Dental College and research centre brings into kind notice that I am in need of the Tissue sections of cases of Mild Epithelial dysplasia and Poorly Differentiated Squamous cell carcinoma that i can get from your department. Kindly issue the same that will be your most kindness.

Thanking you

Yours faith fully

Dr Minha Majeed Kak

Pg Final year

8/12/2020.

Dr K. Vinod Kumar

(Guide)

Dept. of Oral Pathology
K.D.C.R.C. MBD.

for - Seema 8/12/20

Dr Swatantra Agarwal

(HOD Principal)

Kothiwal Dental College and Research Centre

Forwarded to the Principal
for the need full

9/12/2020

Total of 14 Slides has been handed over after the payment of Rs 1400/-. Receipt enclosed.

9/12/2020

09/12/20

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 22:30:23+05'30'
Foxit PDF Editor Version: 2024.1.0

BAREILLY INTERNATIONAL UNIVERSITY

(Established Under Govt. of U.P. Act 26 of 2016)
ohilkhand Medical College Campus, Pilibhit Bypass Road, Bareilly-243006 (U.P.) INDIA
Phone: 0581-2526011-12, Fax: 0581 - 2303345
Email: info@rmchbareilly.com, info@biu.edu.in Website: www.biu.edu.in

Date: 12.04.2019

To,
The Principal Secretary,
Government of Uttar Pradesh,
Ministry of Health & Family Welfare,
Lucknow, Uttar Pradesh.

Subject: Acceptance of Fund Sanction of ₹116.14 Lakhs for Clinical Trial

Respected Sir,

On behalf of Bareilly International University, I extend my sincere gratitude to the Government of Uttar Pradesh and the Ministry of Health & Family Welfare for sanctioning a generous fund of ₹116.14 lakhs for our proposed Clinical Trial project.

This support will significantly contribute to the advancement of medical research and clinical studies at our institution. We are committed to utilizing these funds effectively for the successful execution of the trial and ensuring compliance with all required guidelines and protocols.

We remain dedicated to fostering scientific innovation and promoting public health initiatives, and we deeply value the Ministry's confidence in our institution. Our team is eager to begin the project and contribute to the welfare of society.

Once again, thank you for your continued support and encouragement. We look forward to maintaining a productive relationship with the Ministry as we embark on this important project.

Lata Agarwal

Yours sincerely,
Dr. Lata Agarwal
Vice Chancellor
Bareilly International University

Vice Chancellor
Bareilly International University
Pilibhit Bypass Road, Bareilly
Pin :- 243006 (U.P.)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 14:50:20+05'30'
Foxit PDF Editor Version: 2024.1.0

BAREILLY INTERNATIONAL UNIVERSITY

(Established Under Govt. of U.P. Act 26 of 2016)
ohilkhand Medical College Campus, Pilibhit Bypass Road, Bareilly-243006 (U.P.) INDIA
Phone: 0581-2526011-12, Fax: 0581 - 2303345
Email: info@rmchbareilly.com, info@biu.edu.in Website: www.biu.edu.in

Date: 17.03.2020

To,
The Principal Secretary,
Government of Uttar Pradesh,
Ministry of Health & Family Welfare,
Lucknow, Uttar Pradesh.

Subject: Completion of Clinical Trial Project Funded by ₹116.14 Lakhs

Respected Sir,

I am pleased to inform you that Bareilly International University has successfully completed the Clinical Trial project funded by the Government of Uttar Pradesh with the sanctioned amount of ₹116.14 lakhs. The project has been executed in full accordance with the approved plan, ensuring all ethical and procedural guidelines were followed throughout the study.

We are grateful for the generous financial support provided by the Ministry, which enabled us to undertake this important research initiative. The outcomes of the trial have contributed valuable insights to the medical field, and we are confident that they will have a positive impact on public health in the state and beyond.

We appreciate the trust and collaboration extended to us and look forward to future opportunities to work together for the advancement of healthcare and medical research.

Thank you once again for your support.

Lata Agarwal

Yours sincerely,
Dr. Lata Agarwal
Vice Chancellor
Bareilly International University

Vice Chancellor
Bareilly International University
Pilibhit Bypass Road, Bareilly
Pin :- 243006 (U.P.)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 14:50:20+05'30'
Foxit PDF Editor Version: 2024.1.0

संख्या -एफ- 573 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023

प्रेषक,

बृजेश कुमार सिंह
अनु सचिव (लेखा) मुख्यमंत्री,
उत्तर प्रदेश शासन।

सेवा में

MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT
BY PASS RD BAREILLY

मुख्यामंत्री कार्यालय लेखा अनुभाग-2(वि०को०) लखनऊ, दिनांक : 28-02-2023

विषय- मुख्यमंत्री विवेकाधीन कोष से उपचार हेतु स्वीकृत आर्थिक सहायता।

महोदय,

मुझे आपसे यह कहने का निर्देश हुआ है कि संलग्नक में उल्लिखित व्यक्ति/व्यक्तियों के उपचार हेतु, उनके नाम के सम्मुख अंकित धनराशि मा० मुख्यमंत्री विवेकाधीन कोष से स्वीकृत की गयी है। कुल स्वीकृत धनराशि का कोषागार, जवाहर भवन,लखनऊ/रिजर्व बैंक ऑफ़ इंडिया के UTR संख्या RBI0602323033694 दिनांक 28-02-2023 अंकन रू 675300 (छः लाख पचहत्तर हज़ार तीन सौ मात्र) संलग्न है।

2. यदि किसी प्रकरण में चालू वित्तीय-वर्ष में एक बार से अधिक धनराशि स्वीकृत हो गयी है तो प्रथम बार स्वीकृत धनराशि के अतिरिक्त अन्य स्वीकृत धनराशि का उपयोग केवल अतिरिक्त सहायता स्वीकृत के प्रकरण में ही किया जाए जिन प्रकरणों में अतिरिक्त सहायता का उल्लेख न हो, उन प्रकरणों में प्रथम बार के अतिरिक्त स्वीकृत धनराशि को वापस कर दिया जाए।

3. कृपया, स्वीकृत धनराशि का उपयोग सम्बन्धित लाभार्थी के उपचार पर ही किया जाए।

4. स्वीकृत धनराशि के सापेक्ष उपयोग की गई धनराशि का व्यय विवरण प्रत्येक माह सी०एम०आर०एफ० पोर्टल पर ऑनलाइन दर्शाया जाए।

5. धनराशि का पूर्ण उपयोग हो जाने अथवा लाभार्थी के उपचार की आवश्यकता न रह जाने की दशा में/ पूर्ण उपयोगिता प्रमाण-पत्र सत्यापित मूल बिल/वाउचर्स आदि के साथ ऑनलाइन प्रेषित किया जाना सुनिश्चित करेंगे।

6. 6. स्वीकृत धनराशि में से अप्रयुक्त/अवशेष धनराशि को यथाशीघ्र अनु सचिव (लेखा), मुख्यमंत्री, उत्तर प्रदेश शासन के पक्ष में भारतीय स्टेट बैंक, जवाहर भवन शाखा, लखनऊ पर देय बैंक ड्राफ्ट के माध्यम से उपलब्ध अथवा उत्तर प्रदेश सरकार की वेबसाइट https://cmrf.up.gov.in पर उपलब्ध 'Pay Online' विकल्प में लेखा शीर्षक संख्या 0070-अन्य प्रशासनिक सेवाये- 60- अन्य सेवाये- 800-अन्य प्राप्तियाँ-07 अन्य प्रकीर्ण प्राप्तियाँ मद में चालान के माध्यम से जमा कराने के उपरान्त ई-चालान का समस्त विवरण उत्तर प्रदेश शासन को प्रेषित करना सुनिश्चित करने का कष्ट करें।

भवदीय

संलग्नक:- उपरोक्तानुसार।

Digitally Signed By
बृजेश कुमार सिंह
अनु सचिव (लेखा)।
2023-02-28 16:26:48.73321

संख्या -एफ- 573 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023

प्रतिलिपि: निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाहीं हेतु प्रेषित :-

1. सम्बन्धित जिलाधिकारी को इस अनुरोध के साथ कि कृपया प्रकरणों में स्वीकृत धनराशियों की सूचना सम्बन्धित मा० संस्तुतिकर्ता व लाभार्थी को अपने स्तर से भी उपलब्ध कराते हुए संगत अभिलेखों में अंकन कराने का कष्ट करें।

2. सम्बन्धित लाभार्थी के पंजीकृत मोबाइल नं० पर इस आशय से संदेश प्रेषित कि कृपया चिकित्सालय से सम्पर्क कर उपचार करायें।

आज्ञा से,
बृजेश कुमार सिंह

Bareilly International University Registrar Bareilly

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECBC6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

Google Translated Copy Hindi to English

Nurn^besr-F- 573hirty-four/M.M.Ka-Account-2 (V.K.)/ 2023

Sender,

gnjBsh kiifTAr Singh

Urv&sr aHWHUry (AaHMiill&J Ch wf

To,

MEDICAL SUPER1ENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSP1TAL.P1LIBHIT BY PASS RD BAREILLY

Chief Minislor'R OfKos ACCOUAla SOCliiin-2 (Finance)

LuC*fWW, Date: 28-02-2023

SubjKb Fifmxiyi ewislancc approved For treatment 1'ftm Ch*r Mn«te7s Diswetkraiy Fund.

Sir,

Il ani drecfad In 1?Hl you 9101Tflf the ireartmant nf ihg psregrVpe<BOh8mentioned in ehe gEachifinenL Iha amounl mcrrtkinsd against Iher name has befn sansdfaned 1rc»m lire HWible Chier Minister's Dippreltonsiy Fund. THeiixal sanctioned amount^ R& $75300 fslK lavi seventy live thausand Ifma hundred only! i& enclosed with theIITR rRirrWer HBICKIZ3Z-3&33694 dated 2942^20^ of Ihe TrcdSiiy. Ja^aror Elw^n. LL^n^Vteserve Bank of India

2. If in any case funds hBV9 teen Sanctioned marn than once ki Che CdiVertt Fmancinl year, then Iha funds sanctioned other than the amount saixakined far the fr^t true should be used only in cases where additional sssIsIsnoe is Sanctioned. In tho&R G9hs Where addSfanfll assistance is not mRHlKHnad. thB 9ddiBonfll Snitunt sanctianenl for Ihi? irst 1Une Should be rsLumed. Lei ri txt done.

3. Please. Ite sanclJawd auxm^ should be ubiwd only Inr the iraalmirt cf the «0wenwd beneficiary.

4. The expendLire statement of ihe Smounf utilised In refeUon lo llws sanctimed amount should he displayed cnlinn cm the CMRF parId every month

5. In case ihe amount is fully utilized or ihe beneficiary no longer requires treatment, ensure that the compile utilization certificate is sent online along with verified original bills/vouchers etc.

H Ths uwMwiflHAmeiiWMM Oxi ul &■uncfconMjmajei should W dQMsiifcd u accon mi pcwMx^ m favour of Under Sw&vlHy l4==anhi Gh^Mr«wcr Bosunnart ci Ul»r Pnrtath. in 5i3B 9jr*; tf trtw Ihrulw Wumt; lk?Mi. Luqlqk^.

After depositing, the amount through chaMan in Ihe account head number 0070-Qther Administrative Services - 60-Other Services- 800-Other Receipts-07 Other Miscellaneous Receipts head in Ihe 'Pay Online' option i*v?ilable on the Utta'' Pradesh Government website hnps:f/cmrf,up pov in, please ensure that all Ihe details of the c-challan are sen! 1o 1he Utlar Pradesh Government

Sncardy

✓

Errclosure :- As above.

Digitally signed By Bried-i Kumar Singh

Under &sy«arj lAcKtim)

2023-02-28 16^26:4® 73321

Numt^-F-573 thirty-four,«M M Accounl-Z (V.KJ / 2023

Copy: For information and necessary action to th& following:-

1. With Ihe request 10 1hd conoemsd Distncl MBfliStraLe ihal ptaaM! provide 1he ififdrriiaiian regarding Ihe aasiLiitxied amount in Wecssss Id Ihe cDncnmecl reccmmender and benofiMry at your io^l end also ges it recorded in bne ifeinveni records.

2. Send a message to the registered mobile number of ihe concerned beneficiary with Ihe ir*emwn id please contact ttie hosniw ard get UeainiHnL

✓

Ey Letter,

Bryesh KurYiSr Si'i^i

Bareilly International University Registrar Bareilly

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97379713F08D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

अनु सचिव (लेखा) ।

2023-02-28 16:26:48.73321

संख्या -एफ- 573 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023 , दिनांक: 2023-02-28 16:26:48.73321 का संलग्नक

क्र० सं०	आवेदन संख्या	लाभार्थी का नाम व पता	प्रयोजन	अस्पताल पंजीकरण संख्या	धनराशि
1	14115123000016	फरमीदा बेगम पत्नी श्री वारिश अली,, मो० ढका ज० पूरनपुर, वार्ड नं०–15, तहसील - पूरनपुर, जिला – पीलीभीत।	उपचार हेतु सहायता	00000	₹300000/- (रुपये ₹ तीन लाख मात्र मात्र)
	द्वारा:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT BY PASS RD BAREILLY				
2	14114923000011	मुकेश पाल पुत्र श्री झाझन लाल ,, नि0ग्राम हसनपुर पोस्ट मझारा ब्लाक समरेर थाना व तहसील दातागंज जिला बदायूँ	कैंसर के उपचार हेतु सहायता	00000	₹200000/- (रुपये ₹ दो लाख मात्र मात्र)
	द्वारा:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT BY PASS RD BAREILLY				
3	14114923000016	महेश सिंह पुत्र श्री ओमकार सिंह ,, नि0ग्राम इटौआ पोस्ट पेंपल परगना सतासी तहसील बिसौली जिला बदायूँ	उपचार हेतु सहायता	CR NO-4535748	₹175300/- (रुपये ₹ एक लाख पचहत्तर हज़ार तीन सौ मात्र मात्र)
	द्वारा:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT BY PASS RD BAREILLY				
		कुल धनराशि	छः लाख पचहत्तर हज़ार तीन सौ मात्र		675300

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C9733791 13F08D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

Google Translated Copy Hindi to English

Under

No. F-57334/M.M. Accounts-2 (V.K.) / 2023, Date: 2023-02-28 16:26:48.73321 Annexure

No.	application Number	Name and address of the beneficiary	Purpose	hospital registration number	amount of money
1	14115123000016	Farmida Begum wife of Shri Waris Ali,, Mo. Dhaka J. Puranpur, Ward No.-15, Tehsil - Puranpur, District - Pilibhit.	Assistance for treatment	00000	☐300000/- (Rs 1.3 lakh only)
	BY:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL, PILIBHIT BY PASS RD BAREILLY				
2	Hasanpur Post 14114923000011 Maghara Block Sarmer Police Station and Tehsil Dataganj District Badaun	Mukesh Pal son of Shri Jhajan Lal, resident of Village	Help for cancer treatment 00000		☐200000/- (Rupees two lakh only)
	BY:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL, PILIBHIT BY PASS RD BAREILLY				
3	14114923000016 Mahesh Singh	son of Shri Omkar Singh, resident of Village Itaua Post Pemple Pargana Satasi Tehsil Bisauli District Badaun	treatment assistance	CR NO-4535748	₹175300/- (Rupees One Lakh Seventy Five Thousand Three Hundred only)
	BY:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL, PILIBHIT BY PASS RD BAREILLY				
		sum of money		six lakh seventy five thousand three hundred only	675300

day Ranailly

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C9733791 13F08D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

संख्या -एफ- 608 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023

प्रेषक,

बृजेश कुमार सिंह
अनु सचिव (लेखा) मुख्यमंत्री,
उत्तर प्रदेश शासन।

सेवा में

MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT
BY PASS RD BAREILLY

मुख्यामंत्री कार्यालय लेखा अनुभाग-2(वि०को०) लखनऊ, दिनांक : 24-03-2023

विषय- मुख्यमंत्री विवेकाधीन कोष से उपचार हेतु स्वीकृत आर्थिक सहायता।

महोदय,

मुझे आपसे यह कहने का निर्देश हुआ है कि संलग्नक में उल्लिखित व्यक्ति/व्यक्तियों के उपचार हेतु, उनके नाम के सम्मुख अंकित धनराशि मा० मुख्यमंत्री विवेकाधीन कोष से स्वीकृत की गयी है। कुल स्वीकृत धनराशि का कोषागार, जवाहर भवन,लखनऊ/रिजर्व बैंक ऑफ़ इंडिया के UTR संख्या RBI0842371185053 दिनांक 24-03-2023 अंकन रू 500000 (पांच लाख मात्र) संलग्न है।

2. यदि किसी प्रकरण में चालू वित्तीय-वर्ष में एक बार से अधिक धनराशि स्वीकृत हो गयी है तो प्रथम बार स्वीकृत धनराशि के अतिरिक्त अन्य स्वीकृत धनराशि का उपयोग केवल अतिरिक्त सहायता स्वीकृत के प्रकरण में ही किया जाए जिन प्रकरणों में अतिरिक्त सहायता का उल्लेख न हो, उन प्रकरणों में प्रथम बार के अतिरिक्त स्वीकृत धनराशि को वापस कर दिया जाए।

3. कृपया, स्वीकृत धनराशि का उपयोग सम्बन्धित लाभार्थी के उपचार पर ही किया जाए।

4. स्वीकृत धनराशि के सापेक्ष उपयोग की गई धनराशि का व्यय विवरण प्रत्येक माह सी०एम०आर०एफ० पोर्टल पर ऑनलाइन दर्शाया जाए।

5. धनराशि का पूर्ण उपयोग हो जाने अथवा लाभार्थी के उपचार की आवश्यकता न रह जाने की दशा में/ पूर्ण उपयोगिता प्रमाण-पत्र सत्यापित मूल बिल/वाउचर्स आदि के साथ ऑनलाइन प्रेषित किया जाना सुनिश्चित करेंगे।

6. 6. स्वीकृत धनराशि में से अप्रयुक्त/अवशेष धनराशि को यथाशीघ्र अनु सचिव (लेखा), मुख्यमंत्री, उत्तर प्रदेश शासन के पक्ष में भारतीय स्टेट बैंक, जवाहर भवन शाखा, लखनऊ पर देय बैंक ड्राफ्ट के माध्यम से उपलब्ध अथवा उत्तर प्रदेश सरकार की वेबसाइट https://cmrf.up.gov.in पर उपलब्ध 'Pay Online' विकल्प में लेखा शीर्षक संख्या 0070-अन्य प्रशासनिक सेवाये- 60- अन्य सेवाये- 800-अन्य प्राप्तियाँ-07 अन्य प्रकीर्ण प्राप्तियाँ मद में चालान के माध्यम से जमा कराने के उपरान्त ई-चालान का समस्त विवरण उत्तर प्रदेश शासन को प्रेषित करना सुनिश्चित करने का कष्ट करें।

भवदीय

संलग्नक:- उपरोक्तानुसार।

Digitally Signed By
बृजेश कुमार सिंह
अनु सचिव (लेखा)।
2023-03-24 17:05:22.538497

संख्या -एफ- 608 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023

प्रतिलिपि: निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाहीं हेतु प्रेषित :-

1. सम्बन्धित जिलाधिकारी को इस अनुरोध के साथ कि कृपया प्रकरणों में स्वीकृत धनराशियों की सूचना सम्बन्धित मा० संस्तुतिकर्ता व लाभार्थी को अपने स्तर से भी उपलब्ध कराते हुए संगत अभिलेखों में अंकन कराने का कष्ट करें।

2. सम्बन्धित लाभार्थी के पंजीकृत मोबाइल नं० पर इस आशय से संदेश प्रेषित कि कृपया चिकित्सालय से सम्पर्क कर उपचार करायें।

Bareilly International University ★ Bareilly ★ Registrar

आज्ञा से,
बृजेश कुमार सिंह

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C9739791 13F08D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

Google Translated Copy Hindi to English

Number-F-608 Thirty-four/M.M. Account-2 (V.K.) / 2023

Sender,

Brijesh Kumar Singh

Under Secretary (Accounts) Chief

Minister, Uttar Pradesh Government

To,

MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT BY PASS RD BAREILLY

Chief Minister's Office Accounts Section-2 (Finance)

Lucknow, Date: 24-03-2023

Subject - Financial assistance approved for treatment from Chief Minister's Discretionary Fund.

Sir,

I am directed to tell you that for the treatment of the person/persons mentioned in the attachment, the amount mentioned against their name has been sanctioned from the Hon'ble Chief Minister's Discretionary Fund. The total sanctioned amount of Rs 500000 (five lakh only) is enclosed with the UTR number RBI0842371185053 dated 24-03-2023 of Treasury, Jawahar Bhawan, Lucknow / Reserve Bank of India.

2. If in any case amount has been sanctioned more than once in the current financial year, then the amount sanctioned other than the amount sanctioned for the first time should be used only in cases where additional assistance is sanctioned. In those cases where additional assistance is not mentioned, the additional amount sanctioned for the first time should be returned.

3. Please, the sanctioned amount should be utilized only for the treatment of the concerned beneficiary.

4. The expenditure statement of the amount utilised in relation to the sanctioned amount should be displayed online on the CMRF portal every month.

5. In case the amount is fully utilized or the beneficiary no longer requires treatment, ensure that the complete utilization certificate is sent online along with verified original bills/vouchers etc.

6. The unutilized balance amount out of the sanctioned amount should be deposited as soon as possible in favour of Under Secretary (Accounts), Chief Minister, Government of Uttar Pradesh, in State Bank of India, Jawahar Bhawan Branch, Lucknow.

After depositing the amount through challan in the account head number 0070-Other Administrative Services- 60-Other Services 800-Other Receipts-07 Other Miscellaneous Receipts item through bank draft payable at or in the 'Pay Online' option available on the Uttar Pradesh Government website https://cmrf.up.gov.in, please ensure that all the details of the e-challan are sent to the Uttar Pradesh Government.

Sincerely

✓

Digitally Signed By Brijesh Kumar Singh Under Secretary (Accounts).

2023-03-24 17:05:22.538497

Enclosure :- As above.

Number-F- 608 Thirty-four/M.M. Account-2 (V.K.)/ 2023

Copy: For information and necessary action to the following:-

1. With the request to the concerned District Magistrate that please provide the information regarding the sanctioned amounts in the cases to the concerned recommender and beneficiary at your level and also get it recorded in the relevant records.

2. Send a message to the registered mobile number of the concerned beneficiary with the intention to please contact the hospital and get treatment.

Bareilly International University ★ Bareilly ★ Registrar

✓

By order,

Brijesh Kumar Singh

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C9733791 13F08D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

अनु सचिव (लेखा) ।

2023-03-24 17:05:22.538497

संख्या -एफ- 608 चौतीस/मु.म.का -लेखा-2 (वि.को.)/ 2023 , दिनांक: 2023-03-24 17:05:22.538497 का संलग्नक

क्र० सं०	आवेदन संख्या	लाभार्थी का नाम व पता	प्रयोजन	अस्पताल पंजीकरण संख्या	धनराशि
1	14150230001632	श्री गोपाल पुत्र श्री मंगली राम ,, नि0 ग्राम दुनकी ब्लॉक शेरगढ तह0 मीरगंज जिला-बरेली	उपचार हेतु सहायता	00000	₹500000/- (रुपये ₹ पांच लाख मात्र मात्र)

द्वारा:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL,PILIBHIT BY PASS RD BAREILLY

कुल धनराशि	पांच लाख मात्र	500000

Bareilly International University
Registrar
Bareilly

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0

Google Translated Copy Hindi to English

Under

Secretary(Accounts), 2023-03-24 17:05:22.538497

No. F- 608 Thirty-four / Accounts of M.M.-2 (V.K.) / 2023, Date: 2023-03-24 17:05:22.538497 Attachment

serial no.	application Number	Name and address of the beneficiary	Purpose	hospital registration number	amount of money
1	Block 14150230001632 Shergarh Tehsil Mirganj District- Bareilly	Shri Gopal son of Shri Mangali Ram, resident of Village Dunki	Assistance for treatment	00000	☐500000/- (Rupees 1 five lakh only)

BY:- MEDICAL SUPERIENTENDENT, ROHILKHAND MEDICAL COLLEGE HOSPITAL, PILIBHIT BY PASS RD BAREILLY

sum of money five lakh only 500000

Bareilly International University Registrar Bareilly

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.10.15 18:09:19+05'30'
Foxit PDF Editor Version: 2024.1.0