

CareVista Superspeciality Hospital

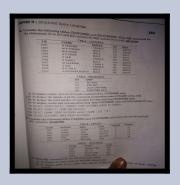
Contact Number: 2233-0404/0808 Email Us @careVista@gmail.com Kolkata, WB, India

LIVING DONOR CARD



Directed By General of Health Services Ministry of Family Welfare Govt. Of India

DONOR DETAILS



Date: 22-12-2002 Donor Registration Number: ODL62073532c0ab2

I, <u>Sachin Agarwal</u>, S/O, D/O <u>Suresh Agarwal</u>, Age <u>22 years</u>, hereby pledge to donate the following from my body for therapeutic purpose as a Living Donor.

Organ(s): Kidney, Liver,

Tissue(s): Bone marrow cells,

Blood Group: <u>A RhD negative (A-)</u> **Contact Number:** <u>8926472877</u>

Emergency Contact Name: Sohini Roy

Adhaar Card Number: 789923145786

E-mail ID: sachin@gmail.com

Emergency Contact Number: 8912667349