

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:** ODL6207400b7ad38

I, <u>Sachin Agarwal</u>, S/O, D/O <u>Subhash Ghosh</u>, Age <u>23 years</u>, hereby pledge to donate the following from my body for therapeutic purpose as a Living Donor.

Organ(s):
Tissue(s):

Blood Group: B RhD positive (B%2B)

Contact Number: 8926472877

Emergency Contact Name: Sohini Roy

Adhaar Card Number: 565678789696

E-mail ID: sachin@gmail.com

Emergency Contact Number: 8981325373