

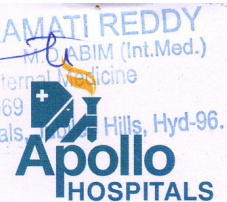
**Dr. Pramati Reddy**

M.D. ABIM (Int.Med.)

Consultant - Internal Medicine

Regd. No. 60969

For appointment Call 040-23607777



**MEDICAL CERTIFICATE FOR WORK PERMIT**  
**CERTIFICAT MEDICAL POUR PERMIS DE TRAVAIL**  
**MEDISCH GETUIGSCHRIFT VOOR WERKVERGUNNING**

The undersigned Doctor in medicine  
Le soussigné Docteur en médecine  
De ondergetekende Dokter in de geneeskunde

Dr. PRAMATI REDDY  
(full name)

**Certifies** that he/she has examined this day Mr./Mrs./Miss  
**Certifie** avoir examine ce jour M./Mme./Mlle.  
**Verklaart** heden Dhr./Mevr./Mej. te hebben onderzocht

NAGARAJU GUNJI

Nationality / nationalité / nationaliteit

INDIAN

Date and place of birth / date et lieu de naissance  
datum en plaats van geboorte

10-07-1985 - [CHILAKALURIPET]

Residing at / résidant à / wonende te

12-7-45/5/4, Ground floor, SAKTHINAGAR, BHARATHNAGAR, Hyd - 500018

**Declares that nothing in his/her state of health indicates that he/she might be incapacitated in the foreseeable future.**

**Déclare que rien n'indique que son état de santé le/la rendra inapte au travail dans un avenir proche.**

**Verklaart dat niets erop wijst dat hij/zij wegens zijn/haar gezondheidstoestand in de nabije toekomst arbeidsongeschikt zal worden.**

Issued at

Fait le

Opgemaakt op

Apollo Hospital

at  
à  
te

15/12/17

Signature of doctor

Signature du médecin

Handtekening van de geneesheer

Dr. M. PRAMATI REDDY  
M.D. ABIM (Int.Med.)  
Consultant- Internal Medicine  
Regd.No. 60969  
Apollo Hospitals, Jubilee Hills, Hyd-96.

Stamp of doctor's office

Cachet du médecin

Stempel van de geneesheer

Visa de l'Ambassade ou du Consulat Général  
Visum van de Ambassade of het Consulaat-Generaal  
À/te \_\_\_\_\_ le/op \_\_\_\_\_

(Sceau/stempel)

Code 57



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Corporate Identity Number (CIN) : L85110TN1979PLC008035

