

13:52



INALI



Home



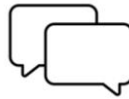
Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

📍 Required support, within the radius of



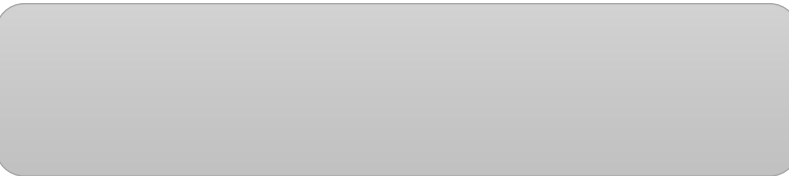
500m

1Km

2Km

5Km

10Km



INALI Resources



Plasma Donors



Free Meals



Medication



Oxygen Supply



Shelter support

See More

"I am what I am because of who we all are"

- INALI



Nelson Mandela
1918-2013

Active Volunteers

1 M+



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Home



Make a
Request



Post



Volunteer



Inbox

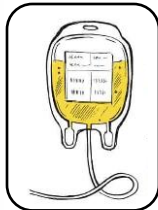


Resources

Current Updates



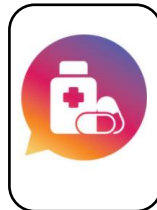
Make A Request



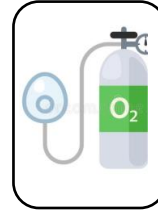
Plasma Donors



Free Meals



Medication



Oxygen Supply



Shelter support



Ambulance



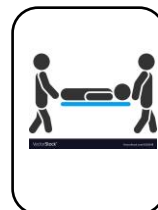
Pregnant ladies



Beds



Elderly Support



Last Ritual Support



Others



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Plasma Donor

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Hospital:

Address:

Gender:

Contact No.

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Free Meals

Request Form

Name:

City:

Pin code:

Contact No. – (Optional)

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Medication

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Hospital:

Address:

Gender:

Contact No.

Covid Positive - Yes No

Any Specific Medication Required-

Make A Request



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INALI



Home



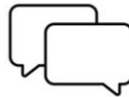
Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Oxygen supply

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Hospital:

Address:

Contact No. – (Optional)

Oxygen level-

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Shelter Support

Request Form

Name:

Age:

City:

Pin code:

Address:

Gender:

Contact No.

Covid Positive- Yes No

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Ambulance

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Address:

Gender:

Contact No.

Covid Positive- Yes No

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Pregnancy Support

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Hospital:

Address:

Contact No. - (Optional)

Pregnancy Month-

Covid Positive- Yes No

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Beds

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Address:

Gender:

Contact No. – (Optional)

Covid Positive- Yes No

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Elderly Support

Request Form

Name:

Age:

City:

Pin code:

Hospital:

Address:

Gender:

Contact No.

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Last Ritual Support

Request Form

Name:

Age:

City:

Pin code:

Hospital:

Address:

Gender:

Contact No.

Covid Positive- Yes No

Make A Request



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INALI



Home



Make a
Request



Post



Volunteer



Inbox



Resources

Current Updates

Make A Request > Others

Request Form

Name:

Age:

City:

Blood Group:

Pin code:

Hospital:

Address:

Gender:

Contact No.

Covid Positive- Yes No

Your Message-

Make A Request



