

Notification

State	District	Block	Village	MCTS ID
Madhya Pradesh	Shahdol	CHC BANSUKLI	BHARRI	20212415670

Deceased woman:

Name	Name of husband	Name of father
MAYA PAW	LOVKESH PAW	

Address of Current Residence

BHARRI

Address of Native Place

BHARRI

Date of Birth of the women	Age of woman	Mobile No
02-01-2022	25	9098401962

Date and Time of death	Place of death	When did death occur
02-01-2022	Health Facility	Within 42 days after delivery

Reporting Details

Date	Designation	Name	Mobile	Address
15-02-2022	Doctor	DR SHIVALI TIWARI	7489348496	

Name of the sub center	Date
Dr SD KAwar	15-02-2022