

BLOOD GROUP **B** Rh +ve  
(Cells & serum tested)

CHECK GROUP BEFORE TRANSFUSION

NAME YASH TIBREWAL  
ADDRESS KANDIVALI (E)

DONOR'S  
SIGNATURE \_\_\_\_\_

ISSUED BY shay.

# **GANDHI SEVA MANDIR**

## **BLOOD BANK**

**(LICENCE NO.:MH-004614)**



### **Blood Donation Certificate**



*This is to certify that*

*Mr./Ms. YASH TIBREWAL*

*Donated Blood for the benefit of society.*

*On 28-9-17 Blood Group B POSITIVE*



**MEDICAL SOCIAL WORKER**  
**MAHATMA GANDHI SEVA MANDIR**