



Date: 09.10.2023

### LEGAL IDENTITY CERTIFICATE

This is to certify that the following Primary Health Centre is functioning under the Department of Public Health and Preventive Medicine, Government of Tamil Nadu.

Name of the District	Name of the Health Unit District	Name of the Block	Name of the Primary Health Centre
Thoothukudi	Thoothukudi	Thoothukudi Corporation	Ganesh Nagar UPHC

This certificate is issued for submitting the Application for the "NABL Medical Entry Level Testing M(EL)T Labs Program".

Medical Officer

Govt. Urban Primary Health Centre

Ganesh Nagar UPHC


**Print Payment Advice:**


Order ID: 202302151249016 Party Name: SHS NUHM TN  
Debit Account: 110010453180 Total Amount: 1716  
Count: 1 Generated On: 19-02-2023 13:08:08  
Expiry Date: 01/03/2023  
Txn Narration: OUT REACH CAMP 01/23

To,  
The Branch Head  
Canara Bank

We authorise the bank to debit our undernoted account maintained with the bank with batch amount and credit the beneficiary(ies) as per ANNEXURE-I uploaded to bank's central system through CSS Web Portal.

Bank account number: 110010453180 Total Amount of Debit: 1716 Rs.  
in words: One Thousand Seven Hundred Sixteen Only

  
.....  
(Sign by Authorized Signatory)

  
.....  
(Sign by Authorized Signatory)

**Information:**

For Canara Bank official:

- Please process the same in CSS Portal available in SAS Package.

For Agency official:

- Please print this advice and submit the dully signed by authorised signatory to Canara Bank branch for processing.

**Annexure-I: (Beneficiary List) Order ID: 202302151249016**

page to be stamped and initial and last page to be signed in FULL with stamp

Sl No.	Txn ID	Name of Beneficiary	Account No.	IFSC	Amount
1	6313934	Harripriya Pharmaceuticals	xxxxxxxxxxxx0094	UBIN0814997	1716

