



STATEMENT OF ACCOUNT from 05/12/2023 to 05/12/2023 for Account Number 20297485178.

INDIAN BANK  
LUCKNOW SULTANPUR  
IFSC CODE:IDIB000L564  
15, CIVIL LINES , SULTANPUR , UTTAR PRADESH  
Branch Code :04431  
Account Number : 20297485178  
Product type : CA-GEN-PUB-METRO/URBAN-INR

SUMAN HOSPITAL  
C/O M/s Suman Hospital  
GOLAGHAT,  
GOMTI NAGAR  
SULTANPUR - 228001

Email : sumanhospitalsultanpur01@gmail.com  
Statement Date :Tue Dec 05 13:21:59 IST 2023  
Uncleared Amount :0.00  
Drawing Power :0.00  
Interest Rate : 14.800

Value Date	Post Date	Remitter Branch	Description	Cheque No	DR	CR	Balance
			BALANCE B/F				185249.61C R

\* Statement Downloaded By SUMAN HOSPITAL on Tue Dec 05 13:21:59 IST 2023

Unless a constituent notifies the Bank immediately of any discrepancy found by him/her in this statement of a/c, it will be taken that he has found the a/c correct.

END OF STATEMENT - from Internet Banking.



**GOVERNMENT OF UTTAR PRADESH**

**District Registering Authority  
SULTANPUR**

**CERTIFICATE OF PROVISIONAL REGISTRATION**

This is to certify that *SUMAN HOSPITAL* located at *GOMTI NAGAR* owned by *SUMAN SINGH* has been granted provisional registration as a clinical establishment under Section 15 of The Clinical Establishments (Registration and Regulation) Act, 2010. The Clinical Establishment is registered for providing medical services as a *Hospital, Single Practitioner, Polyclinic, Pathology, Haematology, Biochemistry, Xray Centre, ECG Centre, UltraSound Centre* under *Allopathy, Ayurveda* System of Medicine.

This Certificate is valid for a period of one year from the date of issue.

**DRA: Sultanpur**

Designation of the Issuing Authority

Place: Sultanpur

Date of Issue: 22/06/2023

*Terms and Conditions of Registration\**

1. The holder of this Certificate of Registration shall comply with all the provisions of Clinical Establishment Act (Registration and Regulation) 2010 and the Rules made there under.
2. The Certificate of Registration is not transferable. The Certificate of Registration shall be displayed in a prominent place in a part of the premises open to the public.
3. Any change of ownership or change of category or change of management or on ceasing to function as a clinical establishment, the certificate of registration shall be surrendered to the authority and application for fresh registration submitted.

*\*Additional terms and conditions are as stipulated by the appropriate registering authority.*

