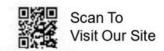
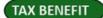


spreadingbliss.org contact@spreadingbliss.org team@spreadingbliss.org +91 91527 13540





MEDICAL AID APPEAL



Dear Donor,

My daughter B/O Roobi ,I delivered preterm baby girl on 12th June 2025, Baby Girl is taking treatment under care of Dr Pawan Kumar Sharma. She is diagnosis with preterm AGA/vlbw/Acute sepsis/NNH/ARDS. She needs treatment NICU management with ventilatory. At Swastik multispeciality Hospital Faridabad

SHE REQUIRES SURGICAL INTERVENTION AND BED CHARGES WITH DIAGNOSTIC INVESTIGATION AND MEDICINES

DONATE NOW

YOUR CONTRIBUTION CAN CHANGE HER LIFE!!

Following the doctor's Suggestion, we admitted our daughter at Swastik multispeciality Hospital. After many expensive tests, it was revealed that our daughter is suffering preterm AGA/vlbw/Acute sepsis/NNH/ARDS. She needs supporting treatment costing. Rs 4,00,000 (FOUR LAKH ONLY). Today she has suffered the risk of losing her life to this disease and as parents there is nothing, we are able to do to help our child.

SHE HAS TO UNDERGO THIS TREATMENT

We can't afford **Rs. 4,00,000/-** to save our daughter life on our meager Income. As a last report. Her condition is getting worse every minute, and she may not have much time left with urgent supporting treatment. We have sold the little Jewellery we owned and now we are penniless. Without a treatment my daughter won't make it. Only you and your generosity can save my Child's life.

SPREADINGBLISS FOUNDATION is a national non profit organization dedicated to Save Life of Children. All donations to SPREADINGBLISS FOUNDATION are exempted from tax under section 80G of the Income Tax Act, 1961. Lastly You Can Make a Family Smile at The End of The Day.

BANK DETAILS:



Account no- 50200033414230

IFSC CODE-HDFC0000358.

(Mira Road Branch)

Spreading Bliss Foundation

TAN NO - MUMS96207G | REG. NO - U85320MH2018NPL312178 A/C NO - 50200033414230 | IFSC CODE - HDFC0000358



Office No: 004/A-12, Sector 5, Janak Shanti Nagar, Rassaz Mall, Mira Road (E)



TO, Spreading Bliss foundation

Date:24/6/2025

Name of the Patient: B/o roobi Age:12days dob-12/06/2025

Gender:female

Medical Diagnosis: Preterm AGA/vlbw/Acute sepsis/ NNH/ARDS

Suggested Treatment: Prolonged NICU management with ventilatory and respiratory

support for 4-6weeks

Proposed date of Treatment: As Soon As possible

This is to certify that the above referred case is critically ill. The child requires support for medical treatment expenses. We hereby recommend this case for financial assistance. The above-mentioned estimate is an approximation for surgery/treatment and in the event of any complications the expenses may exceed the estimated cost.

Estimated cost of treatment: Rs 400000/-

Thank You

Dr. Pawan Kumar Sharma Consultant Paediatrician Department: Pediatrics Swastik Multispeciality Hospital

Dr. PAWAN KUMAR SHARMA M.B.B.S., D.C.H. (A.M.U.) Reg. No. HN-7303

Mohna Road, Opp. SBI Bank, Ballabgarh-121004, Faridabad (Haryana)

Mob.: 9958243438



ग्रकार त्रकार

Covernment of India

Download Date: 24/12/2022



ांगीरव कर्याप

Gourav Kashyap

जम तिथि। DOB: 15/110211998

U-USE / MALE

issue Date: 24/11/2022

33969 1709 8199

आधार, मेरी पहचान



आरलीयी की शिक्षण पहचा का सिक्षिकरण

Unique Rentification Authorus archindia



पुत्रः कृष्ण दत्तः मकान नंबर 220, राजीव कॉलोनी, समयपुर रोड, बल्बाबाहः क् सदाबाद, हस्यिरणा -

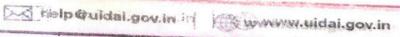
Address:

S/O: Krishah: Duit, house number 220, Rajeev Colony, Samayour road, Ballabgarh, Faridabad, Haryuna - 12100404



3969 1709 81999







भारत सरकार Government of India





रुबी Roobi जन्म तिथि/DOB: 03/06/1989 महिला/ FEMALE

4382 4296 0125

VID: 9106 0929 1470 2456

आधार, मेरी पहचान

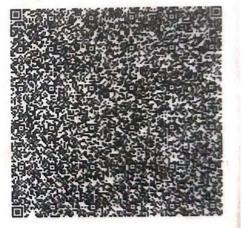


आरतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India



D/O फुलवारी सिंह, ऊषा कुंज कालोनी, एनएच 2 महोली, महोलीं, मथुरा, उत्तर प्रदेश - 281004

D/O Phulwari Singh, Usha Kunj Colony, NH 2 Maholi, Maholi, Mathura, Uttar Pradesh - 281004



4382 4296 0125

VID: 9106 0929 1470 2456





help@uidai.gov.in



www.uidai.gov.in





भारत सरकार GOVT. OF INDIA



नाम / Name ROOBI स्थायी लेखा संख्या कार्ड Permanent Account Number Card DVQPR7154N

पिता का नाम / Father's Name PHULWARI SINGH

जन्म की तारीख / Date of Birth Redigit / Signature



