

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



TAX BENEFIT

MEDICAL AID APPEAL



Dear Donor,

My daughter Siddhi Verma, 3 years old baby girl taking treatment under care of Dr. Zubair Choudhary. She is suffering from Cerebral Palsy and Acute Kidney Injurie. She needs treatment in PICU management. At Choudhary Multispeciality Hospital Mumbai.

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



YOUR CONTRIBUTION CAN CHANGE HER LIFE!!

Following the doctor's Suggestion, we admitted our daughter at Choudhary Multispeciality hospital. After many expensive tests, it was revealed that our daughter is suffering from Cerebral Palsy and Acute Kidney Injurie. She needs supporting treatment costing. Rs 5,00,000 (FIVE 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. 5,00,000/-** to save our daughter life on our meager Income. As a last report, I am requesting you to rescue our **3 years old** baby girl from this agony. 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 this Child's life.

SPREADINGBLISS FOUNDATION is a national nonprofit 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)



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Reg. No.: VVCMC/C-H-390/2021

② 1st Floor, Kajal Apartment, Shree Ram Nagar, Near Bilal Pada, Nalasopara East - 401209.

choudharyhospital20@gmail.com **3** 8169722971 / 8446294131

Managing Irustee, **SPREADINGBLISS FOUNDATION**

Date: 24/11/2025

Subject: Medical Estimate for BABY SIDDHI VERMA

Respected Sir,

This is to inform you regarding BABY SIDDHI VERMA

, a 3 -year-old Female patient, who was brought to our facility with complaints of developmental delays, specifically the inability to walk or stand. Difficulty in passing urine, pain while passing urine, bloody urine sometime, Upon thorough examination and investigation, it has been diagnosed that thechild is suffering from Cerebral Palsy and Acute Kidney Injurie with significant involvement of the lower limbs.

Diagnosis:

- Cerebral Palsy with lower limb involvement
- Weakness of the lower limbs

Proposed Surgical Procedure:

- **Bilateral Hamstring Release**
- Pyleloplasty

The estimated total cost for the surgery and associated treatment is 5,00,000 (Five LakhRupees). This estimate includes the following:

- 140000/-Surgeon's fee
- 20000/-Assistant's fees___
- 20000/-Anasthesia charg
- 152000/-Medication
- 128000/-Hospital charges_
- Investigations 20000/-
- Operation theatre (OT) expenses 20000/-

Please note that the above estimate is subject to variation based on the patient's responseto treatment.

This letter has been issued at the request of the family to assist in raising funds for her treatment. Any support provided in this regard would be deeply appreciated.

Thank you for your consideration.

Yours sincerely,

CHOUDHARY MULKISPECIALITY HOSPITAL REG. No. VVCMQ/C-H-399/2021







BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रीकरच अधिनियम, 1969 की धारा 12 / 17 तथा इतर प्रदेश जन्म मृत्यु रजिस्ट्रीकरच नियम, 2002 के नियम s/15 के अर्थात जारी किय गया)

(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE \$13 OF THE UTTAR PRACESH REGISTRATION OF BIRTHS & DEATHS RULES 2002)

यह प्रमाणित किया जाता है निक्नसिखित सूचना जन्म के मून अभिनेख से ती गई है जो कि प्राथमिक स्थानश्य केंद्र जनातपुर तहसील केराकत जिला जीनपु राज्य/राष्ट्र प्रदेश इतर प्रदेश, भारत के रजिस्टर में इत्लिखित है।

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR PRIMARY HEALTH CENTRE JALALPUR OF TAHSIL/BLOCK KERAKAT OF DISTRICT JAUNPUR OF STATE/UNION TERRITORY UTTAR PRADESTINGS.

HIH / NAME: SIDDHI VERMA

डन्स निषि / DATE OF BIRTH: 23-03-2022 TWENTY-THIRD-MARCH-TWO THOUSAND TWENTY TWO

ATER WE ATER / NAME OF MOTHER: SHAFTI VERMA

SIGHT HOT / MOTHER'S AADHAAR NO:

बंदर्भ के उस्त के समय माता-विमा का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD

JAMUAA, RATANUPUR, CHANDWAK, , KERAKAT, JAUNPUR, UTTAR PRADESH

पंडीकरण संख्या / REGISTRATION NUMBER: B-2022: 9-59814-002100

Evant / REMARKS (IF ANY):

जारी करने की तिथि / DATE OF ISSUE: 14-05-2022 fan / SEX. HERRI / PEMALE

PRIMARY HEALTH CENTRE JALAUPUR

TON OF HIM / NAME OF FATHER:

STUTT WET / FATHER'S AADHAAR NO.

HIST-THE T SAID THE PERMANENT ABORESS OF PARENTS.

JAMUAA, RATANUPUR, CHANDWAK, KERAKAT, JAUNPUR, UTTAR PRADESH

प्रशेषका सरीख / DATE OF REGISTRATION

जारी न्युक्तारीन विविध्यस्ता विवश्यीगात AUTHORITY :

PRIMARY HEALTH CENTRE JALALPUR

UPDATED ON: 14-05-2022 10:57:30



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