

Blood Donation Details

To

**The Mission Director
National Health Mission, Manipur.**

Subject:- Submission of personal Blood Donation details.

Madam,

In pursuance of the State Health Society, NHM- Manipur Notification No. SBC-4(C)/IEC-Obs/2017(Pt.I) dated the 29 May, 2018, the necessary details of my blood donation are submitted hereunder:

No. of Donation	Date of Donation	Venue of Donation	Blood Bank associated with the donation
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No. of Donation	Date of Donation	Venue of Donation	Blood Bank associated with the donation
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Submitted for favor of kind information and necessary action.

Date:

Yours faithfully,

Signature:

Name:

Address:

Mobile No:

Verified by:

Officer-in-Charge:

Blood Bank & Transfusion Unit: