

**OFFICE OF THE CIVIL SURGEON CUM CHIEF MEDICAL OFFICER,
WEST SINGHBHUM, CHAIBASA**

ADMIT CARD

Candidate Copy

Exam Center	SADAR HOSPITAL, CHAIBASA	Paste here recent Photograph
Reporting Time	10.00 AM	
Exam Date / Time	20-09-2019 / 11.00 AM to 01.00 PM	
Roll No	1	
Name	ANISHA KUMARI	
Father's/Husband Name	ARUN KUMAR SAW	Signature of Candidate
Date of Birth (D/M/Y)	16-Oct-96	
Post	NUTRITION Councillor MTC	

Note – Any electronic devices (Mobile Phone, Pager, Docupen) / rough paper / baggage are not allowed in exam hall. Violation of this will lead to cancellation of candidature.



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Roll No	2	
Name	SULEKHA SUNDI	
Father's/Husband Name	LATE SAMU SUNDI	Signature of Candidate
Date of Birth (D/M/Y)	12-Feb-89	
Post	NUTRITION Councillor MTC	

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Roll No	3	
Name	MILI KUMARI	
Father's/Husband Name	SHAMBHU PRASAD GUPTA	Signature of Candidate
Date of Birth (D/M/Y)	12-Aug-81	
Post	NUTRITION Councillor MTC	

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Father's/Husband Name	SHAMBHU PRASAD GUPTA	Signature of Candidate
Date of Birth (D/M/Y)	12-Aug-81	
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Roll No	4	
Name	REKHA KUMARI	
Father's/Husband Name	LATE ARJUN PRASAD	Signature of Candidate
Date of Birth (D/M/Y)	12-Sep-84	
Post	NUTRITION Councillor MTC	

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