

FORM 19

Certificate by competent authority [as defined at rule 2(c)] For Indian near relative, other than spouse, cases (In case of spousal donor, Form 6 will be applicable)

[See rule 5(3)(c)]

(Format for the decision of Competent Authority)

This is to certify that as per application in Form-11 for transplantation of Kidney (Name of Organ or Tissue) from living donor who is a near relative of the recipient under the Transplantation of Human Organs Act, 1994(42 of 1994), submitted on 11/9/24 by the donor and recipient, whose details and photographs are given below, along with their identifications and verifications documents, the case was considered after the personal interview of donor and recipient (if medically fit to be interviewed) by the competent authority in the meeting held on 25/9/24

Details of Recipient

Name: Vikash

Age: 28

Sex: M

Father or Husband Name: Lt. Shyam Sundar

Address: H.No. 146 A, Nai Basti

Baluganj, Agra, U.P.

(28001)

Hospital Reg. No. P-776697

of donor with Recipient Mother

Details of Donor

Name: Mrs. Kusum Kumari

Age: 42

Sex: F

Father or Husband name: Lt. Shyam Sundar Singh

Address: H.No. 146 A, Nai Basti

Baluganj, Agra, U.P.

(282001)

Hospital Reg. No. P-776636

Relation



(Photographs must be signed and stamped across the top of the page in the best of knowledge of the members of the competent authority. The relation is out of their being near relative of the recipient. There is no action between recipient and donor and there is no pressure on / coercion of the donor. The submission of following documents.....

Permission is not granted for the following reasons: Permission granted

1. [Signature]
Dr. Sanjay Sharma
(Chairman)

Signature

4. [Signature]
Mrs. Rina Singh
(Member)

Signature

2. [Signature]
Dr. Praveg Goyal
(Member)

Signature

5. [Signature]
Mr. Radhakrishan Gupta
(Member)

Signature

3. [Signature]
Mr. Suresh Tyagi
(Member)

Signature

Date and place: 25/9/24 (Agra)

[Signature]
(Signature and stamp of competent authority)

