



Department of Empowerment of Persons with Disabilities,  
Ministry of Social Justice and Empowerment, Government of India

## Disability Certificate

Issuing Medical Authority, Cuttack, Odisha



Certificate No.: OD1210620110042723

Date: 28/12/2018

This is to certify that I/We have carefully examined Kum. **Kamakshi Priyadarshni Behera** Daughter of Shri **Ramesh Chandra Behera** Date of Birth **30/12/2011** Age **6 Year(s)** Female, Registration No. **2112/00000/1811/0164632** resident of House No. **At-rajib, Po-rajib, Ps-baideswar - 754009** Sub District **Banki** District **Cuttack** State / UT **Odisha**

Whose photograph is affixed above, and I/We satisfied that:

- (A) She is a case of Locomotor Disability  
(B) The diagnosis in her case is **Residual CTEV (Right)**

(C) She has **30%**(in figure) **Thirty** percent(in words) Temporary in relation to her (part of body) as per guidelines (to be specified).

This certificate recommended for **5 year(s)**, and therefore this certificate shall be valid till **28/12/2023**

The applicant have been submitted the following document(s) as proof of residence

**Nature of Document(s):** Aadhaar card

*Kamakshi Priyadarshni Behera*

Signature / Thumb impression of the Person With Disability

*Pankaj Kumar Das*

Signatory of notified Medical Authority Member



*Pankaj Kumar Das*  
Issuing Medical Authority, Cuttack, Odisha