OFFICE OF THE COUNCILLORS OF

MIDNAPUR MUNICIPALITY

MIDNAPORE, PASCHIM MEDINIPUR

| Memo No. 1825 P.HS Oevelopmes | Date. 13.07.17 |
|--|--|
| From:- Chairman, Midnapore Municipality. | 80(H) |
| To:- The Director, SUDA. H.C Block (9LGUS BHAWAN), Sector in Bidhan Nagar, Kol-700106 | 100 pt 17 |
| Sub:- Cleaning the drains of this Municipality for avoiding | Water logging |
| Ref:- your office memo No. SUDA/50-2016/432(1 | 123) dt. |
| Sir, With reference to above, Sri Saibal Giri Sanitary Inspector. Officer for this purpose at this ULB. This is for favour of your inforsuitable action. | |
| Name of the staff Saibal Giri Sanitary inspector | Whatsapp No. 9932737149 |
| With Thanks | (de . |
| Mi | Chairman, idnapore Municipality. |
| Memo No. | Date |
| Copy forwarded to the Dist Magistrate ,Paschim Medinipur(Deptt) for favour of information. | Municipal Affairs |
| Memo No | Chairman, idnapore Municipality Date. |
| E.O. (Midnapore Municipality) for information S.I. (Mahapatra) for information and for sharp monitoring of the | e Citizen on the use of |

- 2. S.I. (Mahapatra) for information and for sharp monitoring of the Citizen on the use of plastic etc.
- 3. S.I. (Giri) for information and necessary action.

Chairman, Midnapore Municipality



MIDNAPUR MUNICIPALITY

MIDNAPUR

Memo No:- 4906 /Acct.

Dated: - 07/12/2013.

From: Administrator

Midnapore Municipality

To: The Director,

State Urban Development Agency ILGUS Bhavan, H-C Block, Sector – III,

Bidhannagar, Kolkata - 700106.

Ref: Your Memo No-SUDA-82/2013/1947 dated 04.12.2013.

Sub: Statement of Expenditure under different scheme.

Sir.

I am sending the statement of expenditure under different schemes as desire by you as per above reference.

Enclose: As above.

Executive officer Midnapore Municipality

46/12/13

tatement showing the Scheme-wise expenditure incurred by MIDNAPORE MUNICIPALITY For the period from 01.04.2013 to 30.11.2013

| Sl. No | Scheme fund released by M.A.Department | Amount in Rupees |
|--------|--|------------------|
| 1 | 13 TH FINANCE COMMISSION | 0.00 |
| 2 | 2 ND STATE FINANCE COMMISSION | 0.00 |
| 3 | 3RD STATE FINANCE COMMISSION | 11386566.0 |
| 4 | WEST BENGAL URBAN EMPLOYMENT SCHEME | 8451650.0 |
| 5 | EMPLOYMENT GENERATION SCHEME | 1075912.0 |
| 6 | BASIC MINIMUM SERVICES | 0.0 |
| 7 | ONE ADDITIONAL CENTRAL ASSISTANCE | 0.0 |
| 8 | WATER SUPPLY TO ULBS . | 763191.0 |
| 9 | SINKING OF SPOT SOURCES | 665271.0 |
| 10 | CONST OF MUNICIPAL OFFICE BUILDING | 1803381.0 |
| 11 | PURCHASE OF LAND FOR DEVELOPMENT SCHEME | 0.0 |
| | Sub Total | 24145971.0 |
| Sl. No | Scheme fund released by SUDA | Amount in Rupees |
| 12 | COMMUNITY BASED PRIMARY HEALTH CARE SERVICES | 0.0 |
| 13 | IHSDP | 5115490.0 |
| 14 | JANANI SURAKSHA YOJANA | 0.0 |
| 15 | NFBS | 0.0 |
| 16 | SCHEME OF HOUSING FOR URBAN POOR | 2204597.0 |
| 17 | SJSRY(REVISED) | 2550086.0 |
| 18 | UIDSSMT | 622722.0 |
| 19 | IGNOAPS | 25657494.0 |
| 20 | ILCS(REVISED) | 0.0 |
| 21 | SCHEME FOR SOCIO ECONOMIC CAST CENSUS | 314000.0 |
| 22 | USHA | 10935.0 |
| 23 | 13TH FINANCE COMMISSION | 12174637. |
| 24 | DENGU PREVENTION | 59748. |
| 25 | FIXED GRANT | 0.0 |
| 26 | GPF/CPF OF EMPL UNDER ROPA'98 | 0. |
| 27 | IGNDPS | 1508075. |
| 28 | IGNWPS | 151860 |
| 29 | RAJIV AWAS YOJANA(RAY) | 0. |
| 30 | BACKWARD REGION GRANT FUND | 4430533. |
| 31 | SURVEY FOR IDENTIFICATION OF MANUAL SCAVENGERS | 15370. |
| | URBAN BEAUTIFICATION PROG.UNDER DEV.OF MPL.AREAS | 0. |
| 32 | URBAN PRIMARY HEALTH CARE SERVICE | 0. |
| 33 | Sub Total | 69849762. |
| CI NI- | Scheme fund release by DLB | Amount in Rupees |
| Sl. No | SISHU SIKSHA PRAKALPA | 889910. |
| 34 | Sub Total | 889910. |
| | Grand Total | 94885643. |

Executive officer
Midnapore Municipality

Administrator \
Midnapore Municipality



HEALTH WING

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No. SUDA-Health/309/08/178

Date 02.09.2013

From: Financial Advisor, SUDA

To:

: The Administrator

Medinipur Municipality

Sub. : Financial operationalisation relating to Urban RCH Programme.

Sir,

With reference to the communication of Executive Officer, Midnapore Municipality vide no. 3624/PHS dt. 30.08.2013, this office earlier communication may be treated as cancelled.

Fund for an amount of Rs. 59,911/- (Rupees Fifty nine thousand nine hundred eleven) only relating to Urban RCH already released through NEFT to Indian Overseas Bank, A/C No. – 056701000090912 may be transferred to Indian Overseas Bank, Midnapore Branch, A/C No. 056701000011053 for undertaking the related works, as sought for.

Thanking you.

Yours faithfully,

Financial Advisor, SUDA

SUDA-Health/309/08/178/1(2)

Dt. .. 02,09.2013

CC

- 1. ADM (G) & Project Director, HHW Scheme, Midnapore Municipality
- 2. Executive Officer, Midnapore Municipality

Financial Advisor, SUDA

D\Dr Goswami\Urban RCH\Letter Head ULBs doc

03222-275384 03222-266483

MIDNAPUR MUNICIPALITY MIDNAPUR

Memo No . 3 6 93 / H

Dated 5: 19/13

From: The Executive Officer

Midnapore Municipality

To: The Project Director (Finance).

State Urban Development Agency

H.C. Block, Sector- III.

ILGUS BHABAN, Bidhan Nagar,

Kolkata- 700106.

bo (K)

Sub:- Remittance of fund in favour of Midnapore Municipality against 5/B A/c No -056701000011053 relating to R.C.H scheme and others.

Sir,

As directed by the Administration of Midnapore Municipality, the current Account of this Municipality bearing No. 056702000000237 of IOB Midnapore is now closed and non operating also.

As such, you are requested to take necessary arrangement for remittance of Fund infavour of this Municipality in the 5/B A/C No 056701000011053 of IOB Midnapore relating to R.C.H. scheme and others.

Particular of the Bank A/C are given below

Name of the Bank: INDIAN OVERSEAS BANK MIDNAPORE BRANCH

Account No: 056701000011053

Type of Account: savings Bank Account.

IFSC Code: IOBA0000567.

9-Digit MICR Code: 721020302

This is for your information and necessary action.

Yours faithfully

Executive Officer Midnapore Municipality

MIDNAPUR MUNICIPALITY

MIDNAPUR, DIST: PASCHIM MEDINIPORE

Memo No. 3331...

From:-**Executive Officer** Midnapur Municipality

To, The Director SUDA, II GUS BHAVAN, SECTOR-III SALI LAKE, KOLKATA-700106 Dated. 74 7

As per your memo no: SUDA-Health/458/13/135(76) Dated 23/07/2013 an amount of R.s. Sir. 59911/- only of honorarium of ANM/GMN up to the month of September-2013 has duly credited in DFID Bank Account on-90912. Further as desire by you, I am sending the Account no. for further transmission of relating to urban RCH Programmer as below. Again issue permission to transfer the fund amounting to Rs.: 59911/- to Municipal Current Account No: 056701000011053 at IOB, Midnapore Branch which is already credited in DFID account.

Name of the Bank: INDIAN OVERSEAS BANK, MIDNAPORE BRANCH

Account NO: 056701000011053.

Type of Account: Savings Bank Account.

Il SC Code: IOBA0000567.

9-Digit MICR Code: 721020302.

Yours Faithfully,

Executive Officer Midnapur Municipality

Copy to for information and necessary action:-

- 1. Project Director, CMU.
- 2. Health Director, SUDA.
- 3. Sandip Gupta, SUDA Computer Programmer.

PAGE: 01 AFC-9932660032 12:59 08/30/13 ,M 75384 OFFICE OF THE COUNCILLORS OF MIDNAPUR MUNICIPALITY MIDNAPUR, PASCHIM MEDINIPUR Dated 3-19/13 Memo No. 3624 /PHS From Executive officer, Midnapore Municipality, P.O. Midnapore, Dist-Paschim Medinipore To The Director State Urban Development Agency, "ILGUS BHAVAN" II C Block Sector -III Bidhannagar Kolkata 700016 Sub:-Financial operationalisation relating to Urban RCII Programme, Ref:- Your Memo No SUDA-Health-/309/08/166 dated 20.8.13. Sir. Reference to the above subject and Memo No SUDA-Health-/309/08/166 fund for an amount Rs 59911-00 (Rupees Fifty nine thousand nine hundred eleven) only relating to Urban RCH released through NEFF to IOB A/C No -056701000090912 which is now closed and non operating A/C.In this situation, you are requested to issue permission to transfer the fund amounting to Rs 59911-00 to municipal S/B A/C No 056701000011053 at IOB Midnapore Branch instead to A/C No-056702000000237. Particulars of Bank A/C are given as such:-Name of the Bank: INDIAN OVERSEAS BANK, MIDNAPORE BRANCH. Account No:056701000011053 Type of Account: Savings Bank Account. IFSC Code: IOBA0000567. 9-Digit MICR Code:721020302 Landiday Yours faithfully Executive Officer Midnapore Muhicipality



HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No. . SUDA-Health/309/08/166

20.08.2013

Date

From: Director, SUDA

To

: The Administrator

Medinipur Municipality

Sub. : Financial operationalisation relating to Urban RCH Programme.

Sir,

Fund for an amount of Rs. 59,911/- (Rupees Fifty nine thousand nine hundred eleven) only relating to Urban RCH already released through NEFT to Indian Overseas Bank, A/C No. – 056701000090912 may be transferred to Indian Overseas Bank, A/C No. 056702000000237 for undertaking the related works.

Thanking you.

Yours faithfully,

Director, SUDA)

Dt. .. 20.08.2013

SUDA-Health/309/08/166/1(2)

CC

1. ADM (G) & Project Director, HHW Scheme, Midnapore Municipality

2. Executive Officer, Midnapore Municipality

Director, SUDA

DADr Goswami Urban RCH/Letter Head ULBs doc

To
The Project Officer,
Health SUDA
Govt. of West Bengal
Municipal Affair Dept.
ILGUS BHAVAN



Sub:- Prayer for the post of AHO under DFID assisted HHW scheme.

Respected Sir,

From a reliable source I come to know that the post of an A.H.O. is lying vacant in the Medinipur Municipality since long ago I want to offer my candidature for the said post if you consider me eligible for the same.

As for my qualification I state that I am a B.H.M.S doctor and completed B.H.M.S in the year 2012 under The West Bengal University of Health Sciences. For you kind information I state that BHMS is equivalent to M.B.B.S as I have enter this course by WBJEE (JENPARH 2005).

My Bio- data is furnished below for your kind perusal and sympathetic consideration.

As a permanent resident of Midnapur town under Medinipur Municipality from my born hood I want to serve the people of our local Municipal area with utmost sincerity and dedication.

I shall be remain ever gratefull to you if kindly consider me eligible with my B.H.M.S qualification in place of M.B.B.S qualification as desired by you.

Thanking you,

Dated: 18/06/2013 Midnapore

Dr. Basudeb Charraborty

Dr. Basudeb Chakraborty

Regn No. 29845 by Council of Homoeopathic Medicine, W.B.

My Bio - data and other certificate are enclosed here for you information please.

Recognite Oursification of Alto is MBBS.

BIO - DATA

NAME

: Dr. BASUDEB CHAKRABORTY (B.H.M.S)

Regn. No. 29845 (Council of Homoeopathic Medicine, W.B.)

FATHER'S NAME

: Ashis Kumar Chakraborty

PERMANENT ADDRESS

: Sukanta Sarani, Keranitola,

Ward No. 10, Midnapore Municipality,

P.O. -Midnapore,

DIST. - Paschim Midnapore.

PIN - 721101. (West Bengal)

Mobile No.

: +91 9851194837

PERSONAL INFORMATION

Date of Birth

: 22.04.1987

Sex

: Male

Marital Status

Unmarried

Nationality

: Indian

Religion

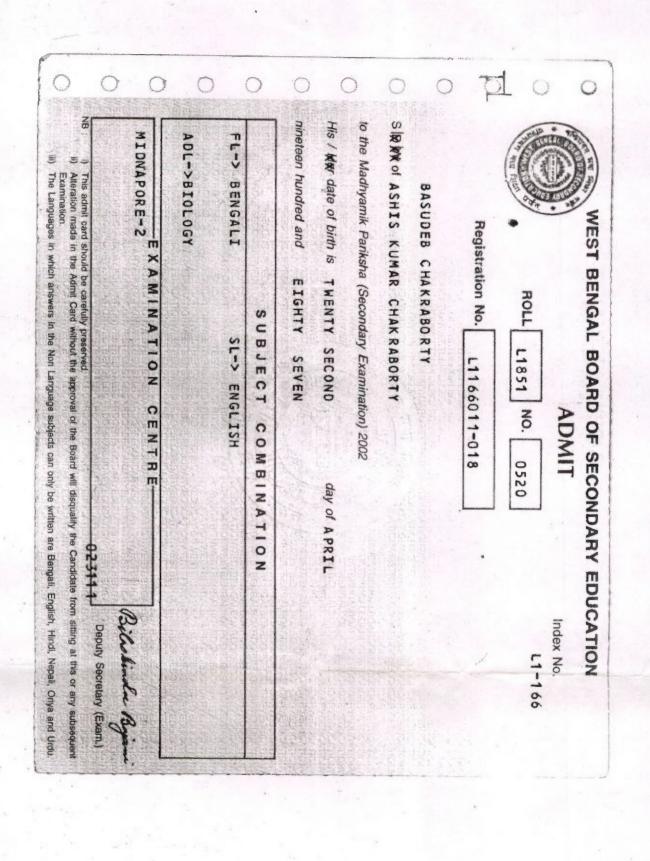
Hindu

Caste

: General

EDUCATIONAL QUALIFICATION

| Exam. | Board/ University | T | |
|-------------|-------------------|-----------------|----------|
| Madhyamik | | Year of Passing | Division |
| | W. B. B. S. E. | 2002 | 1ST |
| H. S. | W. B. C. H. S. E. | 2005 | |
| B. H. M. S. | W. B. U. H. S | | 2ND |
| | 77. D. U. 11. 3 | 2012 | PASS |



KHARAGPUR HOMOEOPATHIC MEDICAL **COLLEGE & HOSPITAL**



AT: KAUSALLYA, P.O: KHARAGPUR, DIST: PASCHIM MEDINIPUR, PIN-721301

Tel: 03222-255695 (C), 223018 (H)



INTERNSHIP COMPLETION CERTIFICATE

| Ref. No. : KHMCH/19 | VT/2012/19 | | Date: 4th May,2012 |
|-----------------------|-----------------|-----------------------------|-------------------------------|
| Name of the Internee: | BASUDEB | CHAKRABORTY | |
| Examination Passed: | BHMS I,II,III, | IV under The West Bengal | University Of Health Sciences |
| Roll No. 110422 | 202 Pro | rvisional Registration No.: | 4005 |
| From Council of Homo | eopathic Medici | ne, West Bengal. | |
| | | * | |

Internship posting started on 2nd May, 2011 and completed on 1st May, 2012

| SI. No. | Name of the Department | Period of Posting | Remarks |
|------------|--|----------------------|---|
| 1. | Medicine including Psychiatry, Dermatology and Paediatrics etc. | 8 months | Maintained records of 40 acute and 25 chronic cases. Proved one drug. |
| 2. | Surgery including ENT, Ophthalmology. | 1 month | Maintained records of 5 surgical cases. |
| 3. | Gynaecology and Obstetrics | 2 months | Maintained records of 5 antenatal check-up and 3 delivery cases and 3 cases of Gynaecology. |
| 4. | Community Medicine | 1 month | Maintained records of knowledge gained in Community Health Centres & various Health Programmes. |

| No. of days repeated due | to absence | other reason if any for repetition of Intern | iship with |
|--------------------------|------------|--|------------|
| the Deptt. Name | | | |
| | | | |

During the internship period he / she has also worked in the Pathology, Radiology departments and has assisted in their routine working.



Nouncil at Anmaeapathic Medicin

Certificate No. 29845.

In Respect of Entries Made in Part A of the Register. Certificate of Registration

Kolkata, the September 2012

Date of Registration

Name

Address or place of Service

Qualifications and dates thereof

Paragraph of the schedule under which registration

is allowed

| | 0 | Chiax palements. | | Dr. Isasnalle | |
|--------------|----------------------|--------------------|----------------------|-----------------------|---|
| Min - 72/101 | Dist Daschim Medinih | 50.0 - Moidanhois. | (Suranta Sasan) 2012 | Espanitola 4 5 Subtem | |
| | N. | 1 | 12 May 2012 | 6ch. 15. A. M. S | 5 |
| | | | | CU | |

respect of the name specified in the certificate. I hereby declare that the certificate reproduces the entries in the proper columns of Part A of the Register of Homoeopathic Practitioners in

This certificate will require no renewal.

and also to answer all inquiries that may be sent to him by the Registrar in regard thereto in order that his/her correct address may be Every Registered Medical Practitioner should be careful to send to the Registrar immediate notice of any change in his address, duly inserted in the Register of Registered Practitioners

B - 7001 - 12500

Checked & verified by

1331

Kegal Majumen 14-9-2012



HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref & DA-Health/309/08/22

Date 19.04:2010

From:

Project Officer

Health, SUDA

To

Th e Chairman

Mednipur Municipality

Sub. : Non-admitance of expenditure submitted for the month

of Feb. & March, 2010 under HHW Scheme.

Ref.: Your communication bearing no. 105/DFID dt. 07.04.2010.

Sir,

On scrutiny of copies of bills and vouchers submitted along with SOE for the month of Feb. & March, 2010,the following observations have been made:

| Voucher No. | A/C head | Bill / Voucher amount (Rs.) | Amount not admitted (Rs.) | Remarks |
|----------------|----------------|--------------------------------|---------------------------|---|
| 67 | Operating Cost | 230.00 | 65.00 | Accounts Assistant is entieled |
| 68 | Operating Cost | 230.00 | 65.00 | to a DA of Rs. 105.00 instead of Rs. 170.00. |
| 81 | Training | 800.00 | 800.00 | External faculty other than staff of Health wing SUDA is entitled to receive faculty fee. |
| | TOTAL | 1260.00 | 930.00 | |

Hence, the admitted SOE is of Rs. 2,93,054.00 instaed of Rs. 2,93,984.00.

You are requested to take necessary action in this regard to reconcile your office record.

Yours faithfully,

CHELLINA

Project Officer

D \Dr Goswami\DFID\DFID - ULBS(1) doc



HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No DA-Health/312/08/661

Rete 3:2010

From: Project Officer

Health, SUDA

To: The Chairman

Medinipur Municipality

Sub. : AA & FS for purchase of Furniture and Equipment for HHW Scheme.

Ref.: Your communication bearing no. 5261/DFID dt. 15.02.2010.

Sir,

With reference to your communication on the subject mentioned above, AA & FS is hereby accorded for an amount not exceeding Rs. 1,29,900/- (Rupees One lakh twenty nine thousand nine hundred) only for purchase of furniture and equipment for HHW Scheme provided the existing furniture & equipment are beyond economic repair & / or not usuable. The list of required furniture & equipment along with estimated cost is enclosed herewith.

You are requested to undertake such procurement observing Procurement Rules of Government of West Bengal by March, 2010. A copy of work order in this regard indicating item of furniture and equipment, quantity to be purchased, unit cost of each item, and total cost is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Yours faithfully,

Enclo. : As stated.

Project Officer

SUDA-Health/312/08/661/1(1)

Dt. .. 01.03.2010

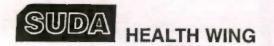
CC:

Project Director, HHW Scheme, Medinipur

Project Officer

Contd. to P-2.

D. Dr. Committee DEID BEID BEID



- 2 -

SUDA-Health/312/08/661/2(3)

Dt. .. 01.03.2010

CC:

1. Health Officer and CDO, Medinipur Municipality

2. Finance Officer, Health, SUDA

Project Officer

D:\Dr Goswami\DFID\DFID - ULBS(1).doc

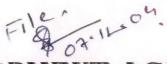
SUDA-Health/312/08/661 dt. 01.03.2010

List of furniture & equipment for HHW Scheme, Medinipur Municipality

| SI. No. | Item | Qty. | Unit Rate (In Rs.) | Estimated Cost (In Rs.) |
|------------|--------------------------|------|-----------------------|-------------------------|
| 1. | Weighing Machine (Adult) | 03 | 825.00 | 2,475.00 |
| 2. | Sphygmomanometer | 03 | 525.00 | 1,575.00 |
| 3. | Stethoscope | 05 | 200.00 | 1,000.00 |
| 4. | Computer | 01 | 22,500.00 | 22,500.00 |
| 5. | Printer | 01 | 6,900.00 | 6,900.00 |
| 6. | Office Almirah | 07 | 5,500.00 | 38,500.00 |
| 7. | Steel Table | 08 | 4,556.00 | 36,448.00 |
| 8. | Office Chair | 04 | 2,800.00 | 11,200.00 |
| 9. | Office Chair | 01 | 3,667.00 | 3,667.00 |
| 10. | IEC Materials : | | | |
| | Sign Board | 08 | 450.00 | 3,600.00 |
| | Flexi Board | 02 | 1,000.00 | 2,000.00 |
| | Tota | 1 | | 1,29,865.00 |
| | | | | Say 1,29,900.00 |

^{*} Specification of each of the items is as per your proposal submitted vide your memo no. 5261/DFID dt. 15.02.2010.





HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No. SUDA-Health/309/08/501

Date07.12:2009

From: Dr. Shibani Goswami

Project Officer Health Wing, SUDA

To

: The Chairman

Midnapore Municipality

Corrigendum

The account head mentioned in this office letter no. SUDA-Health/309/08/427 dt 30.10.2009 is to be read as Equipment, Honorarium / Salaries including Puja Ex gratia and training instead of Salary/Honorarium, Rent, IEC and Operating Cost for July, '09 to Sept., '09.

Yours faithfully,

Project Officer

07.12.2009

Dt. ..

SUDA-Health/309/08/501/1(1)

The Project Director, HHW Scheme - DFID, Midnapore Municipality

- for kind information.

OFFICE OF THE COUNCILLORS OF

MIDNAPORE MUNICIPALITY

MIDNAPORE

Memo No.:

Dated, Midnapore the:

From: Chairman

Midnapore Municipality

The ADM (Dev) & Project Director, DFID (Midnapore Municipality Paschim Medinipur.

Sir.

You are requested to attend on Interview Board for selection of a suitable candidate for the post of 'Account Assistant' under DFID project of Midnapore Municipality to be held on 23rd Oct. 2009 at 02 PM in the Chamber of Chairman, Midnapore Municipality as you are one of the members of Recruitment Board for the staff of MMC (Municipality Management cell) of DFID project.

You are requested to make it convenient to attend the said Interview

Board.

Your heartiest reply in solicited.

Thanking You.

Yours/withfully

Midnapore Municipality

Dated 15.10.09

Memo No 2887 /DFID /4

Copy forwarded to:

Project Officer, SUDA, (Health Wing), Salt Lake, Sector III.

ACMOH (S), Paschim Medinipore.

CIC (DFID), Midnapore Municipality.

Dr. S.K. pahari, Lions Club, Midnapore.

- for information & their kind presence.

Chairman

Midnapore Municipality



HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No.SUDA-Health/309/08/247

Date06.08.2009

From: Dr. Shibani Goswami

Project Officer Health, SUDA

To : The Chairman

Medinipur Municipality

Sub. : Approval of Purchase of Medical Instruments at Medinipur Municipality

under DFID assisted HHW Scheme.

Ref.: Your communication bearing no. 1585/DFID dt. 13.07.2009.

Sir,

With reference to above, approval is hereby accorded to incur expenditure not exceeding Rs. 8,550/- (Rupees Eight thousand five hundred fifty) only for Medical Instruments i.e. purchase of five nos. of Sphygmomanometer (Mercury), five nos. of Adult weight machine (Crown) and three nos. of Stethoscope (Das) under HHW Scheme by December, 2009, as requested for, following the procurement norms.

You are requested to book the expenditure under the A/C head "Equipment" and Statement of Expenditure is to be submitted by January, 2010 accordingly.

Thanking you.

Yours faithfully,

Project Officer

06.08.2009

SUDA-Health/309/08/247

CC

Project Director, HHW Scheme-Mdinipur Municipality for kind information

D.\Dr. Goswami\DFID\DFID - ULBS(1).doc

OFFICE OF THE COUNCILLORS OF

MIDNAPORE MUNICIPALITY

MIDNAPORE

Memo No.: 1585 /DFID

Dated, Midnapore the: 13 / 7 / 69

From :

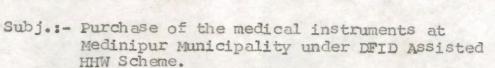
The Chairman,

Midnapore Municipality.

TO

The Project Officer, SUDA, Health Wing, ILGUS BHAVAN, H.C. Block, Sector-III, Bidhannagar,

Kolkata - 700 106.



Madam,

As per your communication bearing No.SUDA-Health/309/08/172 dated 09-02-2009, the details of specification as well as unit cost for each of the medical instruments are stated below.

| Sl.No. | Name of the instrument. | cost of instrument. | No.of item. | Total cost |
|--------|------------------------------|---------------------|----------------|------------------------|
| (1) | (2) | (3) | (4) | (5) |
| 1 | Sphygmomanometer (Mercury) | Rs. 950/- | 5 | Rs.950x5 = Rs.4750/- |
| 2. | Adult weight machine (Crown) | Rs. 550/- | 5 | RS 550x5 = RS. 2750/- |
| 3. | Stethoscope (Das) | Rs. 350/- | 3 | Rs. 350x3 = Rs. 1050/- |

So, the total cost of the above three(3) items

Rs. (4750+2750+1050) = 8550 (Eight thousand five hundred fifty)
only is required to purchase the materials as stated below &
you are requested to send the letter of approval and release
of the fund for the said purpose.

Thanking you,

Yours aithfully.

Midnapore Municipality.



HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref NSUDA-Health/DFID/08/ヨモ

Date 17.09.2008.

From: Director, SUDA

To : Shri D.D. Goswami

Jt. Secretary,

Dept. of Municipal Affairs

Sub: Issue of order in respect of engagement of Project Director at Municipal Management Cell, Medinipur Municipality under DFID assisted HHW

Scheme.

Sir,

I am to enclose the copy of communication of DM, Paschim Medinipur bearing no. 25/MA dt. 04.09.2008 & nominating Shri Nimai Chand Halder, ADM, Paschim Medinipur to act as Project Director of the HHW Scheme, Medinipur Municipality and the copy of Copy of communication of the Chairman, Medinipur Municipality bearing no. 3238/DFID dt.11.09.08 wherein the Chairman intimated that Shri Halder requires approval from the Dept. of MA to act as Project Director.

You are requested to take necessary action in respect of issuing the relevant order. A copy of order of MA dept. bearing no. 1396/MA/C-10/2S-2/2003 dt. 26.11.2007 in respect of his predecessor Shri Ram Krishna Maity, ADM (Dev.) is enclosed for ready reference.

Thanking you.

Enclo. : As stated.

0/

Yours faithfully,

Director, SUDA

Government of West Bengal Municipal Affairs Department Writers' Buildings, Kolkata.



No. 1396/MA/C-10/2S-2/2003

Dated, Kolkata the 26th November, 2007.

Sub : Nomination of Shri Ram Krishna Maity, Additional District Magistrate (Dev) of Paschim Medinipur as Project Director of DFID assisted H.H.W Scheme, Medinipur Municipality.

ORDER

In continuation of this Department Order no.656/MA/C-102S-2/2003 dated 16.06.2006, Shri Ram Krishna Maity, A.D.M.(Dev) of Paschim Medinipur is appointed as Project Director of DFID assisted H.H.W. Scheme, Medinipur Municipality in addition to his normal duties with immediate effect and until further order.

Sd/-S.Bhowmick, Joint Secretary.

No.1396/1(5)/MA/C-10/2S-2/2003

Dated, Kolkata the 26th November, 2007.

Copy forwarded for information and necessary action to the

- 1) The District Magistrate, Paschim Medinipur.
- 2) Shri Ram Krishna Maity, A.D.M (Dev), Paschim Medinipore.
- The Project Officer (Health), State Urban Development Agency, ILGUS Bhavan, H.C.Block, Sector-III, Salt Lake, Kolkata-700 106.
 - 4) The Chairman, Medinipore Municipality, P.O. & Dist. Paschim Medinipore.
 - 5) P.A. to Principal Secretary of this Department.

Joint Secretary

Office of the Councillors of

MIDNAPORE MUNICIPALITY

MIDNAPORE

Ref No 3238/DFID.

Dated Midnapore the 11-9.08

To Sri. D.D. Goswanni The Joint Secretary Deptt : of Municipal Aria rs. Writer's Building.

Subs- Appointment Project Director in DFID assisted IHIW Scheme under Midnapore Municipality

Sir

As per leaser to a clear the 25 M.A. Du- 64 on Joos District Magistrate. Paschim Medimput is here by no minuted Sm. Nimai Chand Hildar. ADM (Dev). Paschim Medimput to act as Project Director of the aforesaid Scheme. But he said that he can not act as Project Director unless he gets proper approval from your end. Now it is placed before you also a with the order of D.M.

Necessary order may kindly be sent in this end as early as possible for the smooth running of the Scheme

Thanking You.

Yours faithfully

A Midnapore Municipality

Copy forwarded to :- Madam Shihani Goswami, Project Officer, H.GUS BHABAN, SUDA.



Government of West Bengal Office of the District Magistrate, Paschim Medinipur Municipal Affairs Department.

| | AN . | |
|-------|---|-----------------|
| | Memo. No. 2.5 /MA Dated: 04.09.09 | |
| To | | |
| M | de Chairman, idnapore Municipality. schim Medinipur. | A |
| Su | Midnapore Municipality as Project Director, D.F.I.D. Scheme | |
| Re | f: Memo, No. 2802/DFID dated 25.08.2008 of the Chairman, Midnapore M | lunicipality, |
| Sir, | | |
| here | In connection with the subject and reference mentioned above, I am to to transfer of Shri Ramkrishna Maity, Addl. District Magistrate (Develop linipur, Sri Nimai Chand Haldar, Additional District Magistrate, Paschi by nominated in place of Sri Ramkrishna Maity to act as the Project Director (th Project.) | pment), Paschim |
| | District Magis Paschim Medi | Trate, 12 2008 |
| | Memo, No/1/MA , Dated: | |
| Pasch | Copy forwarded to Shri Nimai Chand Haldar, Additional District Magism Medinipur for information and necessary action. District Magism Paschim Medini | 3 1x 2000 |
| | | - |



HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No. SUDA-Health/309/08/172

Date09.03.2009...

From: Dr. Shibani Goswami

Project Officer Health, SUDA

To: The Chairman

Medinipur Municipality

Sub. : Purchase & repair of the Medical Instruments at Medinipur

Municipality under DFID assisted HHW Scheme.

Ref.: Your communication bearing no. 7201/DFID dt. 25.02.2009.

Sir,

With reference to above, you are requested to forward details of specification as well as unit cost for each of the 03 (three) items.

Thanking you.

Yours faithfully,

Project Officer

C \Dr Goswami\DFID\DFID - ULBS(1) doc

OFFICE OF THE COUNCILLORS OF

MIDNAPORE MUNICIPALITY

MIDNAPORE

7201 12.F.I.2 Memo No.:

Dated, Midnapore the: 25.02.09

From Chairman,

Midnapore Municipality.

To The Project officer. SUDA (Health Wing),

ILGUS BHAVAN, H. C. Block, Sector-III,

Bidhannagar, Kolkata-91.

Subj. = Purchasing & repairing of the medical instruments.

Madam,

With due honour, I would like to inform you that some medical instruments like Sphygmomanometer, Stethoscope & weight machine (Adult) are damaged. So it is necesary to purchase & repairing of these instruments for different sub health posts. In this connection the amount of Rs. 10,000/-(Ten thousand) only is required for the said purpose. The said amount may kindly be alloted. The following instruments are required to be purchased.

- Sphygmomanometer 3(three) nos.
- 2. Weight Machine (Adult) 3 (three) nos.
- 3. Stethoscope 3(three) nos.

Thanking you,

Yours faithfully,

Midnapore Municipality.



HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref NoSUDA-Health/309/08/132

Date12:01:2009

From: Dr. Shibani Goswami

Project Officer Health, SUDA

To

: The Chairman

Medinipur Municipality

Sub.: Engament of Asstt. Health Officer under DFID assisted HHW Scheme.

Ref.: Your communication bearing no. 5211/DFID dt. 14.11.2008.

Sir,

It is revealed from your communication bearing no. 5211/DFID dt. 14.11.2008 that the post of Asstt. Health Officer (AHO) is lying vacant, the duration of which has not been mentioned.

You would appreciate that implementation of primary Health care services under the HHW Scheme needs availability of services of Medical Professional (at least MBBS). For the purpose, the post of AHO has been sanctioned under the project for proper planning, implementation, monitoring & supervision both at grass root and municipal level.

Hence, you are requested to fill up the vacancy for the post of AHO immediately as per guideline already circulated to you.

This may be given top most priority.

Thanking you.

Yours faithfully,

Dt. .. 12.01.2009

SUDA-Health/309/08/132/1(1)

CC

Project, Director, HHW Scheme and ADM (Dev.), Medinipur

C:\Dr. Goswami\DFID\DFID - ULBS(1).doc

Phone: 275384 266483

Office of the Councillors of

MIDNAPORE MUNICIPA

MIDNAPORE

Ref No 5211 DFID.

Dated Midnapor the 11.08.

List of Personnel engaged under DFID assisted HHW Scheme in ULBs

MMC:

| Sl Faculty No. | Name of the Personnel | Date of Engagement |
|---------------------|------------------------|--------------------|
| A.H.O | | |
| CDO | Dr. Sujit Roy. | 6/10/2007 |
| PHN | Smt. Arati Chakroborty | 9/2/2007 |
| Data Entry Operator | Ranjit Pandab | 2/3/2005 |
| Accounts Asstt. | Manas Das | 4/3/2005 |

HP:

| SI No. | Faculty | Name of the Personnel | Date of Engagement |
|-----------|------------------------|-----------------------|--------------------|
| 1. | PTMO | Dr. Swapan Mallick | 16/05/2006 |
| 2. | PTMO | Dr. Sukumar Mallick | 16/05/2006 |
| 3. | PTMO | Dr. J.N. Satpati | 1/2/2007 |
| 4. | ANM | Arpita Jana | 1/8/2005 |
| 5. | ANM | Bandita Dutta | 1/8/2005 |
| 6. | ANM | Lakshmi Rani Das | 16/05/2006 |
| 7. | Clerk Cum Store keeper | Barun Murdinga | 2/2/2007 |
| 8. | Attendant | Sujata Saha | 1/8/2005 |
| 9. | Sweeper | Rojeda Khatoon | 1/8/2005 |

Samuel

Chairman
Midnapore Municipality

Phone:

275384

Office of the Councillors of

MIDNAPORE MUNICIPALITY

MIDNAPORE

Ref No 5211/DFID.

Dated Midnapore the 14-11-2008.

List of Personnel engaged under DFID assisted HHW Scheme in 11 Non-KMA ULBs

| SHP No. | Faculty | Name of the Personnel | Date of Engagement |
|------------|--------------------------------|-----------------------------|------------------------|
| 1. | F.T.S | MOUSOMI DEY | 1/12/2004 |
| - | HHW Block- 20 | Alpana Toral | |
| | HHW Block- 21 | | 1/12/2004 |
| | | Anima Sahoo | 1/12/2004 |
| | HHW Block- 22 | Krishna Chowudhary | 1/12/2004 |
| | HHW Block- 13 | Sujata Majhi | 1/12/2004 |
| 2. | F.T.S | MALA DUTTA | 1/12/2004 |
| | HHW Block- 11 | Rann Das. | 1/12/2004 |
| | HHW Block- 12 | Dipali Mitra | |
| | HHW Block-10 | Madhu Chanda Dutta. | 1/12/2004 1/10/2005 |
| | HHW Block- 06 | Purnima Sarkar. | 1/10/2005 |
| | HHW Block- 09 | Sikha Maity. | |
| 3. | F.T.S | PUTUL SAMADDAR | 13/02/2006 |
| | HHW Block- 01 | Chaya Roy. | 1/12/2004 |
| | HHW Block- 03 | Ruma Bhakat. | |
| | HHW Block- 05 | | 1/12/2004 |
| | | Namita Chabri | 1/12/2004 |
| | HHW Block- 02 HHW Block- 04 | Kabita Sarkar, | 1/12/2004 |
| Hica | | AratiSaha | 1/12/2004 |
| | F.T.S | SUPRIYA ADHIKARY | 1/12/2004 |
| | HHW Block- 07 | Sarmistha Chakrabroty. | 1/12/2004 |
| | HHW Block- 33 | Buiu Das. | 24/10/2005 |
| | HHW Block- 37 | Rita Banerjee. | 1/12/2004 |
| 94 | HHW Block- 08 | Indura Ray. | |
| | HHW Block- 34 | Maya Ghosh | 13/02/200" |
| | F.T.S | DEBJANI DEY | 1/1-2/2-004 |
| | HHW Block- 31 | Ava Mahato. | 1/12/2004 |
| | HHW Block-30 | Tanuja Sur. | 7/2/2006 |
| | HHW Block- 32 | Indrani Nayek. | 1/12/2004 |
| | HHW Block- 38 | Suva Rani Mondal. | 1/10/2005 |
| | HHW Block- 38 | Soma Santra | 1/12/2004 |
| | F.T.S | SAIRA BEGUM | 1/12/2004 |
| | HHW Block-16 | Nasiba Aleya. | 1/12/2004 |
| | HHW Block- 17 | Stara Khatun. | 1/12/2004 |
| | HHW Block- 18 | Jharna Dey. | 1/12/2004 |
| | HHW Block- 19 | Sefall Singh | 1/10/2005 |
| | HHW Block- 35 | Ranju Patra. | 24/09/2007 |
| | F.T.S | RITA JANA | 1/12/2004 |
| | HHW Block- 24 HHW Block- 25 | Rekha Bhattachariya. | 1/12/2004 |
| | HHW Block- 23 | Alpana Banerjee. | 1/10/2005 |
| | HHW Block- 28 | Sikha Jana, | 13/02/2006 |
| 75 1 | F.T.S | Kalyani Modok. MALAYA SAHOO | 1/12/2004 |
| | HHW Block- 27 | Bulu-Sen. | 1.12.2004 |
| | HHW Block- 26 | Marina Begum. | 1/12/2004 |
| - | HHW Block- 15 | Pampa Adhikary. | 1/12/2004 |
| | HHW Block- 29 | Mithu Chakraborty. | 1102005 |
| 1 | HHW Block- 14 | Rita Ghosh Dostidar. | 1/12/2004 |

Midnapore Municipality