List of Beneficiaries as on 15/11/2024 for Financial Year 2023-24

GO Name: Centre for Mental Hygiene		Project Name:	Half-Way Home For Psycho-Social Rehabilitation Of Treated And
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S.No	Name of the Beneficiar y	Father/ Mother/ Husband Name	Address	Date of Birth	Gender	disability	%age of severity of disability	Date of Entry in Institute	UDID Number	Aadhar Number	Income	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
1	KOIRENG	Koireng/T	OK VILLAGE	1978-10-01	Male	Mental Illness	80	2023-02-28	MN13108 19780004 070					Document Uploaded
2	AM NAREND RA SINGH	m Saratkum		1987-02-03	Male	Mental Illness	80	2021-09-15	MN07308 19870012 419					Document Uploaded
3		Khaidem Tombi Singh/Kha idem kunjarani Devi/Lukra m Ricky Singh	NAGAR	1968-03-01	Male	Mental Illness	75	2014-03-21	MN07408 19680019 768					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth	Gender	disability	%age of severity of disability	Date of Entry in Institute	UDID Number	Aadhar Number	Parental/Family Annual	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
4	SHARMA		LEIKAI LAISHRA M LEIRAK	1976-07-12	Male	Mental Illness	75	2021-09-20	MN07408 19760019 702					Document Uploaded
5	R DEEPKAN TI	Sanajaoba Singh/Tak	PURANA RAJBARI	1996-12-27	Male	Mental Illness	40	2022-09-19	MN07408 19960019 791					Document Uploaded
6	MD SAFIUR RAHAMA N	Haider Hussain/K armarul Nesh/HAI DER HUSSAIN		1970-03-01	Male	Mental Illness	80	2023-07-24	MN07408 19700020 012					Document Uploaded
7	THANGJA M RANBIR SINGH	Th Kulla Singh/Th Gonti Devi/TH	CHINGM EIRONG MAMANG LEIKAI POROMP	1985-09-01	Male	Mental Illness	75	2023-06-13	MN07408 19850019 963					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth	Gender	disability	%age of severity of disability	Date of Entry in Institute	UDID Number	Aadhar Number	Parental/Family Annual Income	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
		SINGH	AT								•			
8	KONJENG BAM OKENDR O SINGH	Ningthou Singh/Late K. Ongbi Ibemchou bi	P.O. MOIRAN G P.S.	1973-01-02	Male	Mental Illness	90	2022-09-07	MN04108 19730004 517					Document Uploaded
9	HUMBAM NOREN SINGH	Huiningsh umbam Kunje	EI MANING LEIKAI WARD NO. 9 THINUNG EI		Male	Mental Illness	80	2023-09-13	MN04108 19720002 411					Document Uploaded
10	PUKHRA MBAM BISHOJIT SINGH		THAMNA POKPI MAKHA LEIKAI	1975-06-02	Male	Mental Illness	80	2022-04-06	MN04108 19750004 841					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth	Gender	disability	%age of severity of disability	Date of Entry in Institute		Aadhar Number	Parental/Fan ily Annual Income	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
		ONGBI AYINGBI DEVI/PUK HRAMBA M ONGBI SHILA DEVI												
11	PUKHRA MBAM SURCHA NDRA SINGH	PUKHRA MBAM AMUBI SINGH/P UKHRAM BAM ONGBI AYINGBI DEVI/PUK HRAMBA M ONGBI LATA DEVI	THAMNA POKPI MAKHA LEIKAI	1976-03-01	Male	Mental Illness	80	2023-04-04	MN04108 19760004 858					Document Uploaded
12	LAIMAYU M SARJU DEVI	Sharma/L	SAMUKO N LEIKAI THANGA MOIRAN	1985-03-21	Female	Mental Illness	90	2021-07-20	MN04108 19850002 530					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth	Gender	Type of disability	%age of severity of disability	Date of Entry in Institute	UDID Number	Aadhar Number	Parental/Far ily Annual Income	nAadhar seeded bank account number	IFSC code	Upload Disability Certificate
13	THOKCH OM IBECHA DEVI	am Thoibi	EI MAMANG	1986-01-25	Female	Mental Illness	90	2022-09-15	MN04108 19860002 652					Document Uploaded
14			EI MAYAI LEIKAI	1971-02-01	Female	Mental Illness	75	2022-04-13	MN04108 19710002 863					Document Uploaded
15	SALAM NIMAICHA ND SINGH		UPOKPI KHUNOU UPOKPI	1971-02-16	Male	Mental Illness	90	2021-09-13	MN04108 19710002 514					Document Uploaded
16		em Merajao Singh/Moir	G HEMAM LEIKAI MOIRAN G	1992-04-17	Male	Mental Illness	90	2022-09-06	MN04108 19920002 926					Document Uploaded

S.No	Name of the Beneficiar y	Father/ Mother/ Husband Name	Address	Date of Birth	Gender		%age of severity of disability	Date of Entry in Institute	UDID Number	Aadhar Number	Parental/Far ily Annual Income	nAadhar seeded bank account number	IFSC code	Upload Disability Certificate
		ngthem Rita Devi								ı	1			
17	HUNGBA M AMITKUM	ungbam Biren Singh/Hui	EI MANING LEIKAI THINUNG EI	1983-03-01	Male	Mental Illness	80	2022-07-14	MN04108 19830002 428					Document Uploaded
18	KARAM SHYAMA NI SINGH	Karam Angada Singh/K Gunamani Devi/KAR AM BIRJIT SINGH		1974-03-01	Male	Mental Illness		2009-05-21	MN07408 19740020 047					Document Uploaded
19	TONY WAIKHOM	WAIKHO	BUNG	1982-02-01	Male	Mental Illness	85	2022-11-19	MN06308 19820020 793					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth		disability	%age of severity of disability	Date of Entry in Institute		Aadhar Number	1 1	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
20	NICHOLS ON LOITONG BAM	L HEMCHA NDRA SINGH/L LEIMAHA L DEVI/YU MNAM SANGEET A DEVI	LAMABA M LEIKAI	1987-09-12	Male	Mental Illness	70	2022-05-03	MN06308 19870021 681					Document Uploaded
21	SHARMA		AND KANGAB AM LEIKAI	1966-08-14	Male	Mental Illness	80	2013-09-10	MN06308 19660021 598					Document Uploaded
22	NINGTHO UJAM WILSON SINGH		LILONG CAHJING CHINGK HONG	2005-10-17	Male	Mental Illness	59	2022-09-20	MN06308 20050021 624					Document Uploaded

S.No	Name of the Beneficiar y	Mother/	Address	Date of Birth	Gender	disability	%age of severity of disability	Date of Entry in Institute		Aadhar Number	Parental/Fan ily Annual Income	Aadhar seeded bank account number	IFSC code	Upload Disability Certificate
		LOIDANG DEVI/NIN GTHOUJA M LOKEND RO												
23		MBAM RASBIHA RI	TERAKH A KUMBI WARD NO. 1	1997-10-02	Male	Intellectual Disability	50	2020-10-06	MN04109 19970016 985					Document Uploaded
24	HEIKRUJ AM INAOCHA SINGH	H. Dijamani	INGOUR OK CHINGM ANG	1987-09-16	Male	Intellectual Disability	59	2023-06-09	MN06309 19870020 629					Document Uploaded
25	OJAM	Thounaoja m	IBUNG NAMBAM CHUTHE	1989-04-01	Male	Mental Illness	50	2017-10-03	MN07308 19890014 010					Document Uploaded

S.No	Name of	Father/	Address	Date	Gender	Type of	%age of	Date of	UDID	Aadhar	Parental/Fam	Aadhar	IFSC code	Upload
	the	Mother/		of		disability	severity of	Entry	Number	Number	ily Annual	seeded bank		Disability
	Beneficiar	Husband		Birth			disability	in			Income	account		Certificate
	y	Name						Institute				number		

Inaocha Devi/Thou naojam Inaocha Devi