

# HEALTH UNIT SAONER

A/No.

029

## Medico Legal Certificate

Date and Time of Examination 17/1/15, 11:35 PM Doctor's Name (Block Letters) Dr. GANESHJIYE

Sr. No.	Name of Injured	Address	Age	Sex	Identification Mark	Brought by P.C.	Police Station
	Pramod Pralhad Pantawane	Saiswal layout ward no-2 Saoner	35 yrs	M	mole on 9th hand	Dinde B NO-1017	PS Saoner
Name of Injury		Dimention and Situation of Wounds			Time of Injury	Simple or Grievous	Nature of Object
		Abbasion over left hand & left leg 3x2cm in size			8 pm	simple	Blunt


  
 अमरदीप ड. कापडे  
 स.फो.ब.नं. १५५६  
 पो.स्ते. सावनेर

er Name & Sign.

Signature of Medical Officer