FORM 3 [See rule 8] Certificate Of Registration ART clinic (Level 1/Level 2)/ART bank (To be issued in duplicate)

Certificate No.: TS/AC/2023/14414/L2/ KHAMMAM/259

- out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period State hereby grants registration to the ART Clinic named below for purposes of carrying Reproductive Technology (Regulation) Act, In exercise of the powers conferred under Section 16 (1) of the Assisted .2023 ending on .08.2028 2021, the Appropriate Authority Telangana
- (a) Name and address of the ART Clinic; Mathrushree fertility centre

Mamillagudem khammam

S.No. Name Post	1 Directo Gynae	2 Embry
Name of the Post	or & ecologist	Embryologist
Name of the Staff	Dr Neeraja Mukkala	Mr Kamal Shaik
Qualification	MBBS MS OBG	Clinical Embryologist
Registration No (if applicable)	68050	

- (b) Type of institution (Government or Private) and; Private
- (c) Type of facility: Level 2

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per the aforesaid Act, for a period of The ART Bank named below for purposes of carrying out activities and procedures as ending on ..

- (a) Name and address of the ART Bank;
- (b) Type of institution (Govt. / Private).
- any contravention there of shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years. This registration is granted subject to the aforesaid Act and Rules there under and
- Registration No. allotted: TS/AC/2023/14414/L2/ KHAMMAM/259
- 4. For renewed Certificate of Registration only: Period of validity of earlier Certificate of Registration from 6

Signature, Name and Designation of the Appropriate Authority

Chair Person & State Appropriate Authority Assisted Reproductive Technology (Regulation) Act & Surrogacy (Regulation) Act, Telangara State

SEAL

Date: 05.08.202

Place: Hyderabad

Display one copy of this certificate at a conspicuous place

Strike out whichever is not applicable or necessary