



क.रा.बी.नि.  
E.S.I.C

कर्मचारी राज्य बीमा निगम  
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)  
**कर्मचारी राज्य बीमा निगम**  
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)  
**EMPLOYEES' STATE INSURANCE CORPORATION**  
(Ministry of Labour & Employment, Govt. of India)  
Email : [ms-ankleshwar.gj@esic.nic.in](mailto:ms-ankleshwar.gj@esic.nic.in)



सत्यमेव जयते

क.रा.बी.नि. हॉस्पिटल, अंकलेश्वर,  
प्लॉट नं. H3012, 500 क्वाटर पास,  
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ESIC Hospital, Plot No. H3012, Nr. 500  
Quarters, Ankleshwar, Dist. Bharuch  
Website : [www.esic.gov.in](http://www.esic.gov.in)

E Comp. No.: 238426

Date: 22-04-2025

## **Circular**

**Subject:- Revised Asset Verification nomination list of ESIC Hospital, Ankleshwar(FY 2024-25)-Reg.**

In compliance with the directives quoted under ESIC HQ Letter dated 10.02.2025, it is informed that the Asset Verification Report is to be submitted alongside the Final Accounts Statement for March 2025. The undermentioned officers have been designated for verification tasks associated with different wards/units/departments/offices/store of this hospital.

MS Office & AMS Office	Sh.Prabhat Dua
AD-Admin/AD-Fin./AD-Vigilance/AD-RTI/AD-Legal/AD-Rajbhasha Office	Dr. Pankaj Prajapati
AD-General/DDO/AD-PG/AD-PR/AD-ICT Office/ General Store	Dr. Arkesh Shah
Casualty Ward, X Ray Department	Dr. Neelima Agrawal
Surgical Ward	Dr. Geetanjali Parmar
OPD First Floor	Dr. Viresh
Medical Store	Dr. Ankit Shah
Ayurveda, Homeopathy	Dr. Prateek Parmar
Paediatric ward, OT, CSSD	Dr. Romit Panchal
Female Medical Ward, Male Medical Ward	Dr. Keyur Patel
OPD Ground Floor, Laboratory	Dr. Jignesh Prajapati
Pharmacy (Dispensary)	Dr. Pankaj Prajapati
ICU/Chemo Ward	Dr. Parimal Panchal
Gynac Ward, Labour Room/Sonography	Dr. Nilesh Parmar
SST Branch	Dr. K. R. Mishra
MRD	Dr. Shreeshma
Kitchen	Sh. Kumar Kunjan

*The concerned officers are requested to complete the aforesaid task by 26.04.2025 and the supply the original copies thereof to Finance & Accounts Branch.*

**This issues with the approval of Medical Superintendent.**

**Enclosed: Reporting format (Annexure-A)**

**(Kumar Kunjan)**  
Assistant Director – Fin.

To

- ### Annexure : A

[illegible]

**CERTIFICATE:**

1. Name & Designation of the Officer who conducted physical verification:  
.....
2. Date of commencement of physical verification:  
.....
3. Date of completion of physical verification:  
.....
4. Number of days taken actually to complete physical verification:  
.....
5. Certified that I have physically verified the following items held charge of Unit  
Medical Surgical, Medicine, Furniture, Linen, Liveries, Stationery and Misc.  
stores, e.t.c held on Charge of Unit.
6. Certified that the surplus / deficiency as found during course of Annual  
Physical Verification is given in the list attached.
7. Certified that no surplus / deficiency has been found during course of Annual  
Physical Verification.
8. Certified that all the entries made in the stock Register concerned have been  
attested under the signature of the Medical Officer/ Medical Officer In-Charge  
of the store of ESIC Hospital, Ankleshwar.

Name (In Capital) .....

Signature .....

Stamp: