

No.D. 31011/1/CMO(M)-22/GVR
GOVERNMENT OF MIZORAM
OFFICE OF THE SENIOR CHIEF MEDICAL OFFICER
MAMIT DISTRICT : MAMIT

Mamit the 30th September, 2024

To

The Director
Directorate of Health Services
Aizawl : Mizoram

Subject : **Submission of Grievance Redressal reports within Mamit District for the time period July-September 2024.**

Sir,

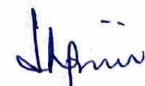
With due respect, I hereby submit the Grievance Redressal reports within Mamit District for the period July-September 2024.

This is for your kind approval and necessary action.

Enclosed: Grievance Redressal Reports for –

1. DHT Mamit.
2. Kangmun PHC.
3. Reiek PHC.
4. Kawrtethawveng PHC.
5. Kawrthah CHC.
6. West Phaileng PHC.
7. Phuldungsei PHC.
8. Marpara PHC.
9. Rawpuichhip PHC.
10. Zawlnuam PHC.

Yours Sincerely,

 30/09/24

(Dr. LALHLUNPUII)

SENIOR CHIEF MEDICAL OFFICER
MAMIT: MIZORAM

**GRIEVANCE REDRESSAL REPORTING FORMAT
MAMIT DISTRICT, MIZORAM**

Reporting year : 2024

Reporting month : July-September, 2024

Reporting Unit/Facility : Office of the Chief Medical officer, Mamit District.

Date of Reporting : 30th September, 2024

S.No.	Name of Facility	July- September 2024	SELNA	FAKNA	SELNA LUT ZAT	FAKNA LUT ZAT	BAWHZUI NGAI	SHT/DHT THLEN NGAI
1.	CMO Office	Nil	Nil	Nil	Nil	Nil	Nil	Nil
2.	Kawrthah CHC	12	3	9	3	9	PHC ah chinfel ani e.	Nil
3.	Kawrtethawveng PHC	Nil	Nil	Nil	Nil	Nil	Nil	Nil
4.	Kanghmun PHC	3	3	Nil	3	Nil	PHC ah chinfel ani e	Nil
5.	Marpara PHC	40	Nil	40	Nil	40	PHC ah chinfel ani e	Nil
6.	Phuldungsei PHC	Nil	Nil	Nil	Nil	Nil	Nil	Nil
7.	Reiek PHC	3	Nil	3	Nil	3	Nil	Nil
8.	Rawpuichhip PHC	Nil	Nil	Nil	Nil	Nil	Nil	Nil
9.	West Phaileng PHC	1	1	Nil	1	Nil	Nil	Nil
10.	Zawlnuam PHC	Nil	Nil	Nil	Nil	Nil	Nil	Nil

Signature 30/09/24

Full Name, Seal & Signature of Senior Chief Medical Officer : **(Dr.LALHLUNPUII)**

Senior Chief Medical Officer
Mamit District