



From
Smt Anita Ramachandran, I.A.S.,
Mission Director,
MEPMA,
HYDERABAD - 500 004

To
The Project Directors
The POs of
GHMC, GVMC, VMC
In the State.

Lr.Roc.No. 864 / MEPMA/2011/Disability / Date 6.12.2013

Sub: MEPMA-Disability –free Aids & Appliances distribution camps –APVCC- in 76 ULBs-all Districts - four days-16.12.2013 to 20.12.2013- mobilizations of needy PWDs –Reg

Ref: 1. Action Plan-2013-2014

2. DO.Lr.No.B1/3250/ APVCC. Dated 04.12.2013 of the Principal Secretary to Government Dept of Women, Children, Disabled and Senior Citizen.

I invite the attention of the Project Directors, MEPMA to subject cited and informed that it is decided to organize camps on free Aids & Appliances cum distribution camps to Persons with Disabilities (PWDs) and Children with Special Needs (CwsNs) by APVCC (Andhra Pradesh Vikalangula Co-operative Corporation) from 16th December 2013 to 20th December 2013 , in all Districts and at 77 ULBs .

In this camps the Assistive Devices like Tricycles, Wheel Chairs, Crutches, Walking Sticks, and Hearing Aids is going to be distributed by the Assistant Director (DW)/ District Manager, APVCC in above said camps

Therefore all PDs are requested to identify the need based beneficiaries for free Aids & Appliances cum distribution camps for PWDs & CwsNs for assistive devices and mobilize the beneficiaries from all ULBs in the districts and send to at identified venue (as per the annexure – I) from 16th December 2013 to 20th December 2013, and send the list of beneficiaries availed assistive devices in above said camps ULB wise to MEPMA Head Office by 26th Dec-2013 (as per the annexure –II).


MISSION DIRECTOR

Copy to

1. The Addl Commissioner UCD GHMC
2. The Municipal Commissioners in all ULBs.

Annexure- II

Camp schedule for Identification of disabled for supply of Triccycle, Wheel Chairs, Crutches, Hearing Aids and walking Sticks for Visually Handicapped.

Sl.No.	District	Divisions to be Covered	Date of Camp
1	Srikakulam	Tekkali	16/12/2013
		Palakonda	17/12/2013
		Srikakulam	18/12/2013
2	Vizianagaram	Parvathipuram	16/12/2013
		Vizianagaram	17/12/2013
3	Visakhapatnam	Visakhapatnam	16/12/2013
		Paderu	17/12/2013
		Narsipatnam	18/12/2013
4	East Godavari	Peddapuram	16/12/2013
		Kakinada	17/12/2013
		Amalapuram	18/12/2013
		Rajmundry	19/12/2013
5	West Godavari	Narsapuram	16/12/2013
		Kovvur	17/12/2013
		Janga Reddygudem	18/12/2013
		Eluru	19/12/2013
6	Krishna	Machilipatnam	16/12/2013
		Gudivada	17/12/2013
		Vijayawada	18/12/2013
		Nuziveedu	19/12/2013
7	Guntur	Narsaraopet	16/12/2013
		Guntur	17/12/2013
		Tenali	18/12/2013
8	Prakasham	Ongole	16/12/2013
		Kandukur	17/12/2013
		Markapuram	18/12/2013

9	Nellore	Gudur	16/12/2013
		Nellore	17/12/2013
		Kavali	18/12/2013
10	Chittoor	Madanapally	16/12/2013
		Chittoor	17/12/2013
		Tirupati	18/12/2013
11	Ananthapur	Ananthapur	16/12/2013
		Penukonda	17/12/2013
		Dharmavaram	18/12/2013
12	Kadapa	Kadapa	16/12/2013
		Jammalamadugu	17/12/2013
		Rajampet	18/12/2013
13	Kurnool	Nandyal	16/12/2013
		Kurnool	17/12/2013
		Adoni	18/12/2013
14	Adilabad	Nirmal	16/12/2013
		Adilabad	17/12/2013
		Mancheri	18/12/2013
		Asifabad	19/12/2013
15	Karimnagar	Karimnagar	16/12/2013
		Peddapally	17/12/2013
		Jagitial	18/12/2013
		Siricilla	19/12/2013
		Manthini	20/12/2013
16	Khammam	Khammam	16/12/2013
		Kottagudem	17/12/2013
		Bhadrachalam	18/12/2013
17	Warangal	Mahabubabad	16/12/2013
		Mulugu	17/12/2013
		Warangal	18/12/2013

18	Nizamabad	Bodhan	16/12/2013
		Nizamabad	17/12/2013
		Kama Reddy	18/12/2013
19	Medak	Sanga Reddy	16/12/2013
		Siddipet	17/12/2013
		Medak	18/12/2013
20	Nalgonda	Nalgonda	16/12/2013
		Bhongir	17/12/2013
		Suryapet	18/12/2013
		Miryalaguda	19/12/2013
21	Mahabub Nagar	Mahabubnagar	16/12/2013
		Wanaparthy	17/12/2013
		Gadwal	18/12/2013
		Narayanapet	19/12/2013
		Nagarkarnool	20/12/2013
22	Ranga Reddy	Vikarabad	16/12/2013
		East Hyderabad	17/12/2013
		West Hyderabad	18/12/2013
23	Hyderabad	Secunderabad	16/12/2013
		Charminar	17/12/2013
		Golkonda	18/12/2013

Annexure -II

Camp Report

Format –List of Beneficiaries of PWDs given Aids & Appliances

Name of the District :

Name of the ULB/Location :

Date of conducted Camp :

SNO	Name of the PWD	SADAREM ID	Type of Disability	Age	Sex	Ward No	SHG of PWD Yes/no	Type of Aids given	Contact No.

Signature of Municipal Commissioner,

District Project Director MEPMA