

Information of BVHA Members

1.	Name of the Organization LkLFkk dk uke	The Leprosy Mission Hospital
2.	Year of Establishment/ LFkki uk dk o"kZ	1903
3.	Is your organization is FCRA registered ? (Please write). D; k vki dh l LFkk , Q-l h-vkj-, - i at hdr gS \ (dlk; k fy [k])	Yes
4.	Address for Correspondence. lk=kkpkj dk i rk	The Leprosy Mission Hospital, P.O. Ramna, Dist. Muzaffarpur 842 002.
5.	Phone / Fax / Email. Oku @ QDI @ b&esy	9472952321, 7091725862 tlmmuzaffarpur@tlmindia.org ujjwal.k.hembrom@tlmindia.org
6.	Contact Person / l i dz 0; fDr	Dr. Ujjwal Kumar Hembrom, Superintendent
7.	Main Target Population / eq; y{; l eq	
8.	Operational Area of the organization/ LkLFkk dk dk; Z {ks=	Bihar State
9.	Organization is working on which issue of health & development ? LokLF; , oa fodkl ds fdu eqnka ij l LFkk dke dj jgh gS \	Tertiary Referral Hospital for Leprosy Right & Development of Leprosy affected.
10.	Source of Economic support (Please write the name). vkfFkd l g; ksx ds l kr (dl; k uke fy [k])	Hospital Patient income & Grant