



**FAMILY BENEFIT SCHEME OF INDIAN MEDICAL ASSOCIATION  
ANDHRA PRADESH STATE  
REGULAR SERIES**



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Lr. No. IMA / FBS Regular - 54/2019

7/06/2019

**BILL FOR FRATERNITY CONTRIBUTION - A.P.  
(REGULAR SERIES)**

Name

FBS No.

We regret to inform you that the members of the Family Benefit Scheme mentioned in Annexure -I, have expired on the dates noted against their names. The Claims from the nominees of deceased members have been received. Last FC bill sent was on 7-12-2018.

Date of Joining	FC Amount	Admin.Charge	Old Dues	Fine Amount	Excess Amount	Total

Last Date of Payment 06-08-2019. Last Date of Payment with Fine of Rs. 200/- is 05-09-2019

**INSTRUCTIONS**

1. A member becomes a defaulter, if he does not pay his contribution within the specified time. No claim will be entertained if a member becomes a defaulter.
2. Member can login FBS website, [www.fbsapima.com](http://www.fbsapima.com) with default User Name as FBS Membership Number or Registered Phone Number and default login password is ima@2018. Member can change the password after first login. Member can download challans, Bills, Receipts from the website.

S.No.			Example
1	User Name	FBS Number / Mobile No.	G4/0050/08899/96 (or) 9889009999
2	Password	ima@2018	ima@2018

3. Please Pay the Bill along with dues, if any, immediately and send to FBS office and keep Xerox copies for your record.
4. Update your cell number, Email ID and change of address if any to this office for regular communication. Enclose the slip duly filled, along with the challan.
5. Bill will be send in June & December every year. Scheme is not responsible for Postal delays. If you don't receive the post, then Bill 54, Deathlist & Challan can be downloded from our website [www.fbsapima.com](http://www.fbsapima.com).
6. There are 680 defaulters of last bill. Please pay in time and avoid being a defaulter and also for smooth functioning of the scheme.

**ENCLOSE THIS SLIP DULY FILLED UP ALONG WITH THE CHALLAN / DD**

Amount Being Paid Rs.	D.D / Challan Date	Bank and Branch

FC-54 Regular Series Dt. 07-06-2019

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Signature

### List Of Deaths Before 31/03/2018

This is the death list before 31/03/2018 . Management committee approved the payments and payments done .

S.No	Name	Branch	Date of Death	Age	Cause of Death
1	Dr B N Sastry	Guntur	04/10/18	80	Natural
2	Dr S Veera Raghava Rao	Pithapuram	05/10/18	69	Refractory shock with Multi organ Failure
3	Dr C Kamprasad	Guntur	30/10/18	78	Natural

The above members nominees will be paid from the amount with the Office .

### BELOW ANNEXURE LIST FOR COLLECTION AMOUNT .

S.No	Name	Branch	Date of Death	Age	Cause of Death
1	Dr YS Krishnamurthy	Bapatla	13/03/18	92	Natural Death
2	Dr K Kamaswera Rao	Visakhapatnam	25/07/18	92	Cardio Respiratory Failure
3	Dr M Malliah	Tirupathi	11/09/18	68	Natural Death
4	Dr P Venkataramaiah	Kavali	19/10/18	83	Cardiac Arrest
5	Dr Mohammad Insaf	Kakinada	05/ 12/18	78	Cardio Pulmonary Arrest
6	Dr Mendu Subba Rao	Visakhapatnam	06/12/28	93	Cardiac Arrest
7	Dr D Venkata Raju	Visakhapatnam	12/12/18	71	Cardio-Respiratory Arrest
8	Dr M Venkata Rao	Kakinada	15/12/18	65	Natural Death
9	Dr Rajendra Prasad AB	Gudiwada	31/12/ 18	71	Ca Bladder/Urosepsis
10	Dr V Srinivas	Machilipatnam	06/1/19	69	Sepsis Resp Failure
11	Dr K Suresh	Vijayawada	08/1/19	44	Cardiac Arrest
12	Dr Hanumanth Rao T	Gudiwada	15/1/19	81	Heart Failure
13	Dr P Mohan Rao	Chirala	16/1/19	74	Rectal Carcinoma
14	Dr Sreeramulu K	Tadipatri	24/1/19	75	Asthma with Cardiac Failure
15	Dr Roopkala K	Visakhapatnam	30/1/19	68	CardioPulmonary Arrest
16	Dr M Satya Narayana	Mad-Horsley	3/02/19	89	DYS Electronia
17	Dr Mrs G Venkata Ramana	Visakhapatnam	5/02/19	83	Severe Persistent Bronchial Asthma
18	Dr Apparao ponnaginti	Visakhapatnam	25/02/19	74	Double Vessel Disease

### PAYMENT SCHEDULE

Schedule	Bill Issue Date	Last Date without Penalty	Pay With Penalty
	07-06-2019	06-08-2019	Rs. 200/- 05-09-2019

All payments after 05 September 2019 will be treated defaulters. Software will not take payment, if you pay without Fine.

Yours Sincerely

*Rao Lv*

(Dr. L.V. Raghava Rao)  
Chairman  
FBS of IMA A.P. State Branch

Yours Sincerely

*G. Nanda Kishore*

(Dr. G. Nanda Kishore)  
Hony Secretary  
FBS of IMA A.P. State Branch

Please update your Phone Number, E-mail id and address

**Changed Address if Any**

**E-Mail Id**

**Cell Phone Number**