


SAMPLE DONOR CARD

NOTTO
National Organ & Tissue Transplant Organisation
4th floor, NIP building, Safdarjung Hospital, New Delhi-29


Directorate General of Health Services
Ministry of Health & Family Welfare, GOI
Ph.: 011-26164770, Website: www.notto.nic.in

Date: Registration No.

I S/o,D/o,W/o,
Age..... (years), hereby pledge to donate the following Organ(s) and/or Tissue(s)
from my body for therapeutic purpose after my death (Brain Stem/Cardiac).

Organ(s): Heart Lungs Kidneys Liver Pancreas Intestine / All

Tissue(s): Corneas/Eye Balls Skin Bones Heart Valves Blood Vessels / All

Blood Group: ID Proof No. (if available):
Age/DOB: Emergency contact No:

**Let your Relatives Know your Wishes.
Keep this Card with you at all time.**

