

PROFILE

BIN QUTAB FOUNDATION & BEGUM NOOR MEMORIAL HOSPITAL BHUBHAR-CHAKWAL RURAL



As on 31st December, 2024

Founder: Mr. Bashir Malik
(BABA BASHIR, Cell & Whatsapp: 0300-8496280)

**BEGUM NOOR MEMORIAL HOSPITAL
BHUBHAR-RURAL CHAKWAL
(Project of Bin Qutab Foundation)**

**All Donations are Tax Exempted under income Tax
Ordinance 2001**
Bin Qutab Foundation is Registered in Pakistan Under
Section 42 of Companies Act, 2017
Securities and Exchange Commission of Pakistan,
Government of Pakistan

www.binqutabfoundation.org UAN: 111-637-637

Email bashir.malik@binqutabfoundation.org



BabaBashirPk



<https://www.facebook.com/bqfoundation> & <https://www.facebook.com/bnmhospital>

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(INCORPORATION, DOCUMENTATION, COMPLIANCES & RECOGNITIONS)

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THE CORE IDEA

We envision establishing an easily replicable model healthcare institutions“ to alleviate human kind from its suffering due to lack of quality and affordable health services, especially the underprivileged segment of society residing in rural areas, to restore their dignity with compassion.



EXECUTIVE SUMMARY

BIN QUTAB FOUNDATION (BQF) Envisioned to work for the cause of Rural-healthcare, Education, Women Empowerment, and skills development through collaborative actions to create lasting change, Bin Qutab Foundation (BQF) established in the year 2007, a Corporate Social Responsibility (CSR) initiative of Bin Qutab Group (an overseas Pakistani family-owned business group, native of Bhubhar village in Rural Chakwal) was incorporated as not for profit, civil society organization with SECP Govt. of Pakistan in 2007 as section 42 of the Companies Ordinance, 1984 vide registration number 0061555. All Donations are Tax Exempted under Income Tax Ordinance 2001.

Our health is everything. We believe good health care is everyone's right. 64% Pakistani population that resides in villages are not having proper access to basic health facilities. Contrary to the ground realities, metropolitan cities have been the center of Governmental priorities and preference of the development sector too. Diseases result in misery, pain, and poverty for millions of rural people across Pakistan. That's why treating and preventing disease is so important to BIN QUTAB FOUNDATION (BQF).

District Chakwal, our entry point, a district with the highest number of disabled persons as per Punjab Govt. Statistics, an alarming percentage of hepatitis and other deadly diseases have now become a home to road accidents as well. As per the recent census, 87.85% population of district Chakwal resides in villages and lacks featured healthcare facilities, thus patients are referred to tertiary care hospitals of Rawalpindi/Islamabad a 3 Hours" drive. In doing so many patients lose their lives on roads, while the survivors are admitted to over burdened hospitals.

Alhamdulillah, with the candid support of our worthy patrons, Bin Qutab Foundation (BQF) started restoring hopes and established. It's First Flagship Project **Begum Noor Memorial Hospital** at Bhubhar Chakwal Rural.

IHITC (Isolation Hospital & Infections Treatment Centre), Islamabad is a 250 Bedded Hospital owned by Federal Ministry of Health, Which had been managed by **BIN QUTAB FOUNDATION (BQF)** under Public Private Partnership from 7th July, 2020 to 31st December, 2022 as well.

THE FOUNDER OF BIN QUTAB FOUNDATION (BQF)

BIN QUTAB FOUNDATION (BQF)'s journey was taken to realize a dream, a dream for the people of Pakistan, for those dwelling in rural areas of the country. Muhammad Bashir Malik (popularly known as Baba Bashir) is Founder of the Foundation.



The story of the BIN QUTAB FOUNDATION (BQF) and Muhammad Bashir Malik run parallel. He was born on 8th October 1947 in Chakwal, Punjab and so was the foundation in that way. He attended high school at Mulhall Mughlan in Tehsil Chakwal and was fortunate to find his first job on 11th of May 1962, at the age of 14 and a half years, as a Floor/Tool Cleaner in a factory based in Karachi. For 2 years, he struggled as a labourer. He attended evening college classes at Sindh Madrasatul Islam Commerce College in the evening classes presently at SMI University. Unfortunately, due to financial constraints, he remained a college dropout.

He got married in 1966 and having one daughter (Rubina Faisal) & five sons Tanveer Malik, Tauqeer Malik, Qadeer Malik, Waseem Malik and Faheem Malik.

In 1964, his career growth began, and from a typist in a Cargo Company in Karachi, he retired as General Manager from one of the largest logistics company in Pakistan in 1995. During these 30 years he lived and traveled in dozens of foreign countries including Africa. He stepped in social entrepreneurship in 1989 by exporting Khussa (Ethnic Shoes) and later Domestic Drinking Water Filters, d i s t r i b u t i o n which transformed into Bin Qutab Group, a group of companies that deal in Projects Logistics, Supply Chain, Water, and WasteWater Treatment, Project Contracting and supplies etc in Pakistan, Dubai (UAE) & Egypt.

The inspiration to help was always present, but the demise of his mother due to cardiac issues in 1980 inspired him to ensure he played his role to help those who were vulnerable to death, due to lack of services, due to poverty; a dilemma his mother had to face and eventually took her life. BIN QUTAB FOUNDATION (BQF) was formed in 2007, to bring social change in the rural health sector. **Begum Noor Memorial Hospital** started operations on Pakistan Day, 23rd March 2016 and has served **1,000,000** Plus patients till 31st Dec, 2024.

MISSION

We aim to restore hopes of the under-privileged rural population in the health sector by providing equitable access to health care services by providing solutions to patients through high quality and highly responsive health care mechanism; a mechanism that is run through volunteer community participation, support of corporate sector philanthropic contributions, and collaboration with the public the sector as well as Natives of the Area. Where health care projects and programs are established

OBJECTIVES








To aid, assist, set up, maintain, administer hospitals, nursing homes, mother and child health care centers, immunization and vaccination centers, family planning centers, diagnostic centers, and eye health care treatment centers. Provision of quality health facilities to unprivileged rural communities of District Chakwal at door step through the establishment of a modern hospital furnished with state-of-the-art electro-medical equipment.

It is an endeavor to assist the Government to improve health infrastructure in rural backward areas. Provisioning of preventive and curative primary/secondary health services, school health services, and health education programs in remote villages peri Urban/city slums in Pakistan.

HOSPITAL SERVICE POLICY

Anybody who walks into the Hospital is to be treated whether he got money or no money. Patients who are eligible for Zakat are treated FREE of Cost on the Zakat account. Other needy and poor patients are treated against Donations either FREE of Cost on subsidized cost which varies from case to case. Well to do families are required to pay their Bill for the services they get.

BOARD /TRUSTEES

	Mr. M. Bashir Malik	Founder
	Justice ® Fazal Miran Chohan	Chairman
	Mr. Muhammad Tauqeer Malik	CEO
	Mrs. Shahida Parveen	Director
	Mr. M. Tanveer Malik	Director
	Dr. Ajmal Nasir	Director
	Dr. Saba Pervaiz	Director
	Mr. Faisal Malik	Director
	Ms. Iqra Faisal	Director

HOSPITAL MANAGEMENT TEAM

Mr. Ijaz Ali Khan	Director (Hospital Projects)
Mr. Muhammad Usman	Director (Corporate Compliances)
Mr. Attique Mirza	Director (Legal)
Mr. Arshad Awan	Director (Finance & Investments)
Mr. Fahim Malik	Director (International Collaborations)
Mr. Ajmal Nasir	Director (Research & Development)
Mr. Shakeel A. Bhatti	Director (Public Sector Communication)
Mr. Shoaib Khan	Director (Partners Affairs)

ADVISORY BOARD

(Under Formation)

- ✓ Central Advisory Board-Islamabad (CAB)
- ✓ Regional Advisory Council All Provinces (RAC)
- ✓ Districts Advisory Team (DAT)

BQF & SDGS (SUSTAINABLE DEVELOPMENT GOALS)

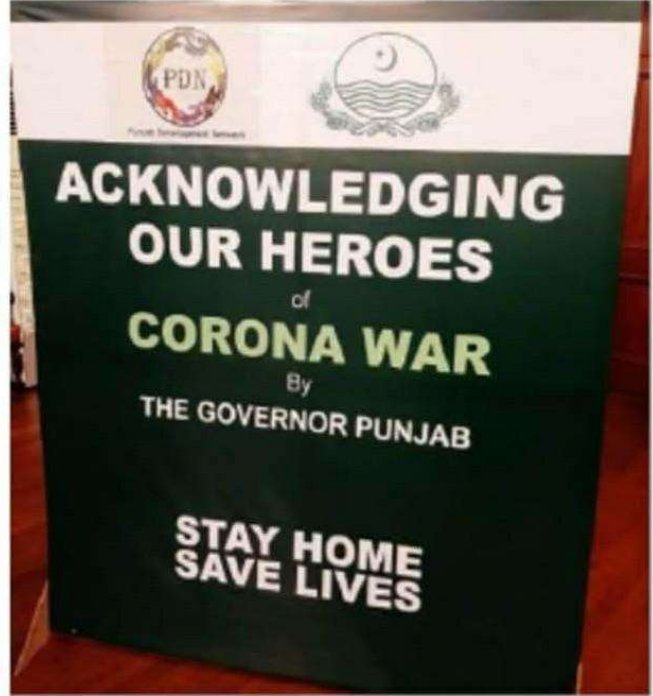
BIN QUTAB FOUNDATION (BQF), through its flagship program – Begum Noor Memorial Hospital seeks to facilitate the government in achieving the commitments it has made towards the accomplishment of the UN Sustainable Development Goals.

Our focus is on Goal 3 i.e. to ensure healthy lives and promote well-being for all ages. The following targets of Goal 3:3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.3.4: By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all Pakistan is a country of over 200 million people. Our total expenditure on health as a percentage of GDP (2020) hovers around 2.6%, which shows either the issue of health is not a priority of the successive governments or Pakistan has not accomplished the framework or resources for the smooth delivery of health services to its citizens. In this context, the role of private-sector health service providers, especially those operating on a nonprofit basis, is considered important and the need of the hour. Services at Begum Noor Memorial Hospital are accessed by the poverty-stricken segment of the society, the most vulnerable segment of the society. Through our hospital, we are reaching out to children, mothers, and patients at large who are in need of life-saving medicines.

RECOGNITIONS

President of Pakistan Dr. Arif Alvi conferred the Federation of Pakistan Chamber of Commerce and Industry (FPCCI) 7th Achievement Awards for 2019 upon 40 recipients for rendering meritorious services in different sectors on July 25 at Aiwan-e-Sadr. Mr. Muhammad Bashir Malik was awarded for his contributions towards making a difference in the field of rural healthcare.







**DR. ABDUL QADIR KHAN GIVING AWARD TO
FOUNDER M.BASHIRMALIK**



**PRESIDENT MR. MAMNOON HUSSAIN GIVING AWARD TO CO
FOUNDER/TRUSTEE MR. TAUQEER MALIK**

IHITC - Isolation Hospital and Infections Treatment Centre **A Public Hospital Managed by Bin Qutab Foundation (BQF)**

Background:

During the height of the COVID-19 pandemic in Pakistan, the government recognized the need for a modern healthcare facility to manage the surge in infections. As part of this response, the Isolation Hospital and Infections Treatment Centre (IHITC), a state-of-the-art 250-bed facility, was built to handle the influx of COVID-19 patients. The hospital was designed with the latest technology and infrastructure to provide specialized treatment for infectious diseases. Upon its completion, the Government of Pakistan sought expert management to ensure the hospital's effective operation and invited Bin Qutab Foundation to take charge of this crucial project.

Solution:

Bin Qutab Foundation accepted the challenge of managing IHITC for a period of 18 months. With a dedicated team of doctors, paramedics, and administrative staff, the foundation took full responsibility for the hospital's day-to-day operations. The foundation implemented rigorous infection control protocols and ensured that patients received high-quality care in a safe environment. This involved not only medical treatment but also efficient coordination of resources, logistics, and human capital to meet the extraordinary demands of the pandemic. By providing continuous support, Bin Qutab Foundation ensured the hospital's smooth functioning during a critical period.

Outcome:

The successful management of IHITC by Bin Qutab Foundation was a significant contribution to the national effort to combat COVID-19. The hospital treated thousands of patients, offering them the care they needed in a time of national crisis. The foundation's efforts exemplified the effectiveness of public-private partnerships in healthcare, showcasing its ability to provide specialized services in collaboration with the public sector. Through this endeavor, Bin Qutab Foundation not only saved lives but also reinforced its commitment to serving humanity in times of need.





29/08/2024

To Whom It May Concern

This letter is being issued with reference to the application for PCP Certification of '**BIN QUTAB FOUNDATION**' based in **Lahore**.

As part of the evaluation process, performance evaluation of the NPO has been conducted based on which the case will be presented before the Certification Panel in due course of time.

In view of the above, it is requested to extend facilitation to the organization while we process their case at our end.

This letter is being issued on the request of '**BIN QUTAB FOUNDATION**'.

Regards

Naveed

Naveed Yousaf

Manager Certification


SECURITIES AND EXCHANGE COMMISSION OF PAKISTAN
CERTIFICATE OF INCORPORATION
 [Under section 32 of the Companies Ordinance, 1984 (XLVII of 1984)]
 Company Registration No. **00000018220/20070602**

I hereby certify that "**BIN QUTAB FOUNDATION**" is this day incorporated under the Companies Ordinance, 1984 (XLVII of 1984) and that the company is an Association under section 42 of the Companies Ordinance, 1984 vide Licence No.CLD/RD/Co.42/24/2007 dated 28-05-2007 issued by Securities and Exchange Commission of Pakistan, Islamabad.

Given under my hand at **LAHORE** this 12th day of *June, 2007*
 (Two Thousand and Seven.)

Fee Rs. 25,000/-

CERTIFIED TO BE TRUE COPY


 (MAHBOOB AHMAD)
 JOINT REGISTRAR OF COMPANIES
 LAHORE

NO. ARI/ 25587

DATED: 12/6/07


 Company Registration Office
 Lahore
 Securities and Exchange Commission of Pakistan



2(36)(c) (Order to grant / refuse / maintain / withdraw approval to Non-Profit Organization)

Name: BIN QUTAB FOUNDATION
Address: 407-A-1, GULBERG-III, LAHORE, Lahore
Gulberg Town
Contact No: 00923255267267

Registration No 2952531
Tax Year : 2024
Period : 01-Jul-2023 - 30-Jun-2024
Medium : Online
Due Date : 16-Aug-2024

Document Date 16-Aug-2024



BIN QUTAB FOUNDATION - NTN-2952531 (hereinafter referred to as the applicant) have applied for renewal of approval under Section 2(36) of the Income Tax Ordinance, 2001 through Iris vide barcode 100000194137704, dated 26-04-2024 for tax year 2024.

In order to evaluate the performance of the applicant in terms of clause (g) of sub-rule (2) of Rule 211 of the Income Tax Rules, 2002, a committee consisting of departmental officers was constituted. The Committee evaluated the performance under the relevant provisions of the Income Tax Ordinance, 2001 and the Income Tax Rules, 2002 and submitted its report vide letter bearing No. Zone-II/174 dated 08.08.2024 and has proposed that the applicant may be granted of renewal of approval as a Non-Profit Organization under section 2(36) of the Ordinance.

I have given due consideration to the record and report submitted by the committee and I am of the opinion that the applicant duly complies with the requirements of the relevant Income Tax Rules and merits approval under section 2(36) of the Ordinance. Therefore, the applicants request for granted renewal of approval as a Non-Profit Organization is hereby approved subject to following conditions:







1. This approval is valid for a period from 15.08.2024 to 30.06.2025 shall expire on 30-06-2025 unless withdrawn earlier.
2. The taxpayer shall also get its performance evaluated by the PCP for renewal of its status as an NPO. The approval will not be granted without PCP certificate.
3. The applicant shall apply afresh under the prescribed rules for re-evaluation of its status as a Non-Profit Organization in terms of Section 2(36) of the Ordinance at the end of the expiry period.
4. During the period mentioned at Serial No. 1, the NPO shall comply with all the relevant provisions and rules including Section 100C of the Income Tax Ordinance, 2001 and Chapter XVII of the Income Tax Rules, 2002. In case of violation of any legal provisions or relevant rules, the approval shall stand withdrawn ab-inito.

Adnan Ahmad Khan
Commissioner
Inland Revenue, Zone-I
CTO LAHORE, TAX HOUSE SYED MAUJ E DARYA ROAD
LAHORE

FEW MAJOR DONORS

FEW MAJOR DONORS

		 HIGHNOON LABORATORIES LTD.	
			
			
			

BEGUM NOOR MEMORIAL HOSPITAL **BHUBHAR, RURAL CHAKWAL**

Begum Noor Memorial Hospital is a “*state of art*”50 plus bedded hospital Approved by PHC that is located in Village Bhubhar, Rural District Chakwal. The hospital is providing quality services in the fields of primary, secondary, and tertiary medical services; services include 24/7 Emergency, Trauma, Pharmacy, X-Ray, Diagnostic Lab, Rehab Center, Dialysis Center with 13 Dialysis Machines, ICU, Male & Female Ward, 05 fully functional Operation Theaters, Gynae/OBS/Delivery, Dental Care, Dermatology, ENT, Eye, General Surgery, and Gastroenterology and Ambulance Service. The hospital is duly registered under the Punjab Health Care Commission as **Category “A” Hospital**, the very first in whole or Rural Punjab in Pakistan.



EXPANSION PLAN

BEGUM NOOR MEMORIAL HOSPITAL BHUBHAR, RURAL CHAKWAL

We are currently Serving with **50 Beds** Approved by **Punjab Health Care Commission (PHC)**, First class Facility to the Rural Community of Pakistan. The Construction of **12000sq/ft** second floor is under completion and now Begum Noor Memorial Hospital Bhubhar, Chakwal, is going to add more **150 Beds** in existing setup till the end of **Year 2025** along with other infrastructural additions which are in progress as well. With that expansion the total capacity of the hospital will be **200 Beds** by the end of 2025.(Insha-Allah).

Facilities Improvement/Additions/Upgradation & Capacity Building:

Improvement of all Departments & Sections at hospital is always a continuous process and we are improving each facility day by day.

Structural Expansions:

- 1. Cardiac Block**
- 2. Children's Block**
- 3. Surgical Block**
- 4. Burn Centre**
- 5. Palliative Care Centre**
- 6. Geriatric Care Centre**
- 7. Hepatitis Clinic**
- 8. Deadly Diseases Registry**
- 9. Honour Home**
- 10. Staff Residential Flats**
- 11. Doctors Residences & Flats**

DATA OF PATIENTS SERVED

1,000,000 Patients treated

From

23rd March, 2016 till 31st Dec, 2024

Department wise details

Medical OPD	799,749
Specialist OPD	70,368
Emergency	36,659
Dialysis (Sessions)	30,362
Dental	15,892
Eye	23,544
Gynae	52,945
Rehab	24,675
	1,054,194

Surgeries

Gen. Surgeries (Started in 2019)	4921
ENT Surgeries (started in 2021)	1,355
Orthopedic Surgeries (Started in 2022)	990
Urology surgeries (Started in 2024)	163
Gynae/OPS (started in 2022)	1883
Eye Surgeries (started in 2020)	2891
Total	12,203

Thalassemia services

Total Patients	1394
Blood transfusions	971

PAITENTS SERVED AGAINST
SEHAT CARD
up to 31st Dec, 2024

Dialysis	9,708
Eye Surgeries	152
General Surgeries	1,517
Orthopedic Surgeries	239



FINANCIAL BENEFITS PASSED TO COMMUNITY

up to 31st Dec, 2024

Zakat (Free Treatment)	31,075,998
Subsidized Treatment	25,546,857
Free Medical Camps	25,004,780
Flood Relief	8,900,000
Food Distribution	12,258,000
Free & Specified food to patients (since 2021)	18,642,880
Provision of wheel chairs	250,500,000
Provision of scholarships (Education) in Bin Qutab College of Health Sciences, Free accommodation and subsidized food	1,835,850
Misc	5,380,000
Total	379,144,365

DOCTORS LIST

Name	Designation	PMDC	Full time /Visiting	No Of Visits
DR Ateeq Ahmed Khan	Medical Superintendent	32557-P	Full Time	
Dr. Arslan	MBBS,RMP	114299-P	Full Time	3 shifts per day
Dr. Fatima	MBBS,RMP	-	Full Time	3 shifts per day
Dr. Afzal	MBBS,RMP	760932-01-m	Full Time	3 shifts per day
Dr. Sadia	BDS	17813-D	Full Time	3 shifts per day
Dr. Mahdeed	Pharm-D (Registered Pharmacist)	31426-a/23	Full Day	09AM-02PM
Dr Aiman Maheen	DPT	N/A	Full Day	09AM-02PM
Consultants				
Dr. Illiyas Riaz	MBBS,FCPS	3505-AJK	Visiting	Twice a week
Dr. Arshad	MBBS,FCPS Anesthesia	3596-AJK	On Call	On Call

Dr. Abdul Rehman	MBBS,FCPS	56547-P	Visiting	Twice a week
Dr. Irfan	MBBS,FCPS	3559-AJK	Visiting	Every Sunday
Dr. Mustansir	MBBS,FCPS	2809-AJK	Visiting	Once a month
Dr. Faizan	MBBS,FCPS	72132-P	Visiting	Every Sunday
Dr. Irfan Anaesthetist	MBBS, DA Training Complete , MBA	60989-P	On Call	On Call
Dr. Yaqoob	MBBS,FCPS	63035-P	Visiting	Twice a week
Dr. Umer	Radiologist	76566-P	Visiting	Twice a week
Dr. Kashif	MBBS,FCPS	78479-P	Visiting	Every Saturday
Dr. Hajra	MBBS,FCPS	78482-P	Visiting	On Call
Dr. Mehwish	MBBS,FCPS	71652-P	Visiting	Every Friday

STAFF MEMBERS LIST

Ser	Department	No. Of Staff	Remarks
1.	Nursing Department	10	Male : 06, Female : 04
2.	Laboratory	02	Male : 02, Female : 00
3.	Pharmacy	05	Male : 04, Female : 01
4.	Reception	02	Male : 02, Female : 00
5.	X-Ray	02	Male : 02, Female : 00
6.	Dialysis	02	Male : 02, Female : 00
7.	Blue Color	10	Male : 10, Female : 00
8.	Electric & Plumbing	01	Male: 01, Female: 00
9.	Accounts	02	Male: 02, Female: 00
10.	Ward Boys	02	Male : 02, Female : 00
11.	Drivers	03	Male : 03, Female : 00
12.	Supervisory Staff	03	Male : 03, Female : 00
13.	Administration	05	Male : 05, Female : 00
14.	Doctors	08	Male: 03, Female: 05
15.	Consultants Doctors	10	Male : 08, Female : 02
Total:		67	Male : 55, Female : 12

LIST OF EQUIPMENTS

Ser	Equipment Name	Model No	Remarks
<u>Laboratory</u>			
1.	Sysmex XP-100	XP 100	
2.	MINDRAY BS 230	MN Mindray BS 230	
3.	Humalyte Plus3	17470/10	
4.	Humalyzer 3500	Ref-16800	
5.	Humareader HS	Ref-16670	
6.	Huma DUO Clot	Ref-15650	
7.	Huma Aqua5	MN Huma Aqua5	
8.	Centrifuge Machine	EBA 20S	Routine maintenance carried out
9.	Deep Freezer	PDFT-155	Routine maintenance carried out
10.	Refrigerator	MN 9188D	Routine maintenance carried out
11.	Blood Cabinet	----	Routine maintenance carried out
12.	Microscope Olympus	MN CX22LEDRFS1	Routine maintenance carried out
13.	Incubator (Hot Air Oven)	30 LIT	Routine maintenance carried out
14.	Blood Bag Shaker	FH2-7080	Routine maintenance carried out
15.	Advantage Lab	Advantage Lab 671350	Routine maintenance carried out
16.	Blood Line Blood Cabinet	-----	Routine maintenance carried out
17.	Centrifuge Blood Bank	MN Pro- Research.K2015R	Routine maintenance carried out
18.	Laptop	L3-AEK1Y0811	Routine maintenance carried out
19.	PC	MT/M.1962-A1g	Routine maintenance carried out
20.	Micropipette	-----	Routine maintenance carried out
21.	HP Laserjet Printer 1320	Q5928A	Routine maintenance carried out
22.	Grouping Light	MN3438	Routine maintenance carried out
23.	PCR Machine	Packed	
24.	Chemistry AnatiscoRyto RT9700	4112005021 IE	
<u>X-Ray</u>			
1.	X-Ray Machine Toshiba 500 MA	BLR-1000A	
2.	Direct Digitizer	A5ER-50845	
3.	Laser Imaging Printer	-----	
<u>Dental</u>			
1.	Dental Unit	KLT-6210	
2.	Dental X-Ray Tube Part	XD2-1.4/85	
3.	Compressor	SD 70/8	Routine maintenance carried out
<u>EYE</u>			
1.	Auto RefractoKerato Meter	KR-7100	

2.	Slit Lamp	OT-3	
3.	Auto Kerato meter	KM-500	Routine maintenance carried out
4.	A-Scan	SP-1000-A	Routine maintenance carried out
5.	Retiono/Ophlhatmoscope	DT801	Routine maintenance carried out
<u>Dialysis</u>			
1.	2x Fresenius	4008S Next Generation	
2.	Fresenius	4008S	
<u>Gynae</u>			
1.	Ultrasound	HS 2000	
2.	ECO	ECO-6	
<u>Physiotherapist</u>			
1.	Treadmill	-----	Routine maintenance carried out
2.	Infrared	-----	Routine maintenance carried out
3.	Tense	BE660	Routine maintenance carried out
4.	Massager	-----	Routine maintenance carried out
5.	Hot Pack	-----	Routine maintenance carried out
6.	Cycling	-----	Routine maintenance carried out
7.	Passive Cycling	-----	Routine maintenance carried out
8.	Suspension	-----	Routine maintenance carried out
9.	Lifter	-----	Routine maintenance carried out
10.	Standing Frame	-----	Routine maintenance carried out
11.	Stationary Cycle	-----	Routine maintenance carried out
12.	Shoulder Wheel	-----	Routine maintenance carried out
13.	Walking Frame	-----	Routine maintenance carried out
14.	Elliptical	4000 PT	Routine maintenance carried out
15.	Stairs Frame	-----	Routine maintenance carried out
16.	CP Walker of Sitting & Standing	-----	Routine maintenance carried out
<u>Emergency / Minor OT</u>			
1.	2 x OT Lights	735	
2.	Auto Clave	SA-232	
3.	2x Suction Machines	7E-A and 797	
4.	5x Cardiac Monitor	-----	
5.	ECG Machin	-----	
6.	2x Nebulizer	-----	Routine maintenance carried out
7.	7xOxygen Cylinders	-----	Routine maintenance carried out
<u>General/ Gynae OT</u>			
1.	OT Light	734	
2.	Anesthesia Machine	WATO EX-20	

3.	Cardiac Monitor	PG M9000	
4.	Suction Machine	6.4P	
5.	Diathermy Machine	400D	
6.	1x Oxygen Cylinder	-----	Routine maintenance carried out
7.	1x Milrous Cylinder	-----	Routine maintenance carried out
<u>Eye OT</u>			
1.	Phacoemulsifier Bosch & Lomb	CX-6200	Not Functional
2.	Operating Microscope	OM-5	
<u>Orthopedic OT</u>			
1.	OT Light	-----	
2.	C-ARM	718031	Purchased on 27 th March 2021
3.	Endoscopy	Ref RCM27HD	Purchased on 27 th March 2021
4.	Suction	7E-A	Routine maintenance carried out
5.	Traction Table	-----	Routine maintenance carried out
<u>ICU</u>			
1.	Ventilator	CH-7403	
2.	5x Infusion Pumps	-----	
3.	Crush Trolley	-----	
4.	3x Cardiac Monitor	PG M9000, CM10000, SN M8160200551	
5.	Defibrilator	-----	
<u>CCU</u>			
1.	Cardiac Monitor	CM1000	
2.	Defibrilator	68	
<u>Miscellaneous</u>			
1.	Multiline Generator	6BT5.9-G2	
2.	UPS	-----	
3.	AC	-----	
<u>Vehicles</u>			
1.	LET-17-637 (Ambulance)	2017	
2.	IDK-6712 (Old Ambulance)	1988	
3.	LET-17-937 (FAW Ambulance)	2017	
4.	LES-13-2983 (Mobile Van)	2013	
5.	LE-11-637 (Honda Car)	2011	Routine Maintenance Carried out
6.	LEA-07-637 (Corolla Car)	2007	Routine Maintenance Carried out
7.	CHL-16-4745 (Motorcycle)	2016	

ISLAMABAD – IHITC HOSPITAL.

This IHITC is a Central Government Hospital. The Ministry of Health is the Principle owner. BIN QUTAB FOUNDATION (BQF) established a Welfare Pharmacy, with the collective efforts of Doctors, Nurses, Paramedics and Staff, medicines for an amount of **1.5 Crore Plus** has been given to the Poor and Needy patients who are otherwise being treated at this Hospital Free of Cost except Medicines.



PHARMACY LICENSE ISSUED BY DRAP-PAKISTAN

BEGUM NOOR PHARMACY
 LICENSE TO SELL/BUY/DISPENSE IN A PHARMACY
 (General Dispensing)

License No: 01-372-0008-114955P
 Valid up to: 28.03.2029

M/S BEGUM NOOR PHARMACY is hereby licensed to sell/composed or prepare on prescription the drugs and sell or distribute all types of registered drugs on the premises situated at INSIDE BEGUM NOOR MEMORIAL HOSPITAL OPPOSITE GOVERNMENT PRIMARY SCHOOL VILLAGE BHUBHAR TEHSIL AND DISTRICT CHAKWAL subject to the conditions specified below and to the provisions of the Drug Act, 1976 and the rules framed thereunder.

Goods address: N/A
 District: CHAKWAL

Town: Chakwal

Status: Dispatched



Proprietor(s)



1. ZAHIRJAN s/o RAHMAT KARIM (CNIC: 1710103386793) Resident of POST OFFICE CHARSADDA, MOHALLAH PANDIA KHAIL CHARSADDA.

Incharge who will personally supervise the sale of drugs alongwith registration number, residential address and National Identity Card No.

Qualified person(s)



1. SANNYA BATOOL d/o ILTAE HUSSAIN (CNIC: 3720140088190) Registration no. 15610-A16 Resident of POST OFFICE, KHAS, OUDHWAL, TEHSIL AND DISTRICT CHAKWAL.

(Medical, Dental & Veterinary Practice Not Allowed)


 Chief Drugs Controller
 Punjab Licensing Authority, Lahore

This Drug Sale License is computer-generated.

License No. _____ Registration No. PBTA/RJ FS-3/3c


Office of Secretary Punjab Blood Transfusion Authority
 Punjab Blood Transfusion Authority
 1-Birdwood Road, Lahore

CERTIFICATE OF REGISTRATION
 (This is not a substitute of License)

This is to certify that BIN QUTAB FOUNDATION BLOOD BANK Blood Bank, situated at Begum Noor Memorial Hospital, Chakwal has been enlisted in the data base of Punjab Blood Transfusion Authority at Sr. No. 3/3 of Registration register under Safe Blood Transfusion Ordinance, 1999.

This is not a substitute of License. License will be issued on satisfactory inspection by designated inspector/ inspection committee. Guide Book For Standard Blood Transfusion Service is being provided. The Blood Bank not complying with the guideline provided, will not be issued License.


 Secretary
 Punjab Blood Transfusion Authority
 Lahore

0389





Pakistan Nuclear Regulatory Authority

Regional Nuclear Safety Directorate-I
Mauve Area, G-6/1, Islamabad

License No: X201(495)

Dated: June 09, 2020

LICENCE FOR DIAGNOSTIC RADIOLOGY

Pursuant to the powers conferred by PNRA Ordinance No. III of 2001 and Regulation PAK/908, the Pakistan Nuclear Regulatory Authority is pleased to issue license to

Muhammad Tauqeer Malik, Begum Noor Memorial Hospital

To own/operate radiation apparatus with following specifications:-

One (01) Radiation Apparatus (Dental X-ray Unit)

for diagnosis purpose at:-

Begum Noor Memorial Hospital, Sohawa Road, Near Mulhal Mughlan, Village
Bhubhar, Chakwal

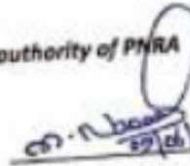
and for no other purpose/site.

GENERAL CONDITIONS

1. Unless terminated earlier, this license shall be valid up to June 30, 2020 after which it is to be renewed. This license covers only the facility as described above.
2. The licensee shall be bound to abide by the provisions of PNRA Ordinance No. III of 2001, Regulations PAK/908, Regulations PAK/904 and any other conditions imposed by this Directorate from time to time. In case of breach of any of these provisions and/or conditions, this license shall be liable to cancellation or suspension.

Issuing Authority on behalf of and under the authority of PNRA

SIGNATURE:


29/06/2020

SEAL OF OFFICE:

M. Naeem Akhtar
Director
Regional Nuclear Safety Directorate-I
Pakistan Nuclear Regulatory Authority
Mauve Area G-6/1 Islamabad

INFRASTRUCTURE & ASSESTS

Hospital and Education Facilities:

- ✓ **Total Land Area: 15 Kanal (9,075 sq yards)**

Covered Area:

• Main Clinical Building –	24,000 sq feet (Ground and First Floor)
• 2nd Floor (Under Completion) –	12,000 sq feet
• Emergency Department –	2,200 sq feet
• Female Accommodation –	2,200 sq feet
• Male Accommodation –	1,400 sq feet
• Café –	850 sq feet
• Masjid –	1,600 sq feet
• Nursing College –	8,400 sq feet
• Executive Office/Donors Lounge –	850 sq feet
• Auditorium (Rehman Hall) –	3,300 sq feet
• Children’s Block – (Under Completion)	3,300 sq feet
• Storage Rooms (4 units) –	1,500 sq feet
• Nursing Hostel –	2,000 sq feet
• <u>Total Covered Area</u>	<u>63,600 sq feet</u>

Land Owned by Bin Qutab Foundation:

❖ Reserved for Education Complex –	09 Kanal (5,445 sq yards) in Bhubhar, Chakwal (Rural)
❖ Reserved for – Education Extension Programme	06 Kanal (3,630 sq yards) in Bhubhar, Chakwal (Rural)
❖ Reserved for Bin Qutab University – in Mona, Chakwal	22 Kanal (13,310 sq yards)

Mobile Healthcare and Equipment:

• Mobile Hospital (Truck-based) –	01 unit
• Ambulances –	03 units
Extensive Inventory – Includes hospital equipment, medical instruments, hospital furniture, and IT installations.	

MEDICAL EDUCATION

BIN QUTAB COLLEGE OF HEALTH SCIENCES

The purpose of establishing **Bin Qutab College of Health Sciences** was to provide this noble profession into the rural areas of Chakwal and surroundings. This also engulfs the vocational development of the poor but intelligent and deserving community living in Chakwal & Surroundings. We are providing messing and lodging facilities as well to facilitate the students of far-flung areas. BQHS is a project of **BIN QUTAB FOUNDATION (BQF)**, recognized by Punjab Medical Faculty.

COURSES OFFERED

1. **Dispenser Diploma**
2. **Medical Lab Technology Diploma**
3. **Operation Theatre Technology Diploma**
4. **Radiology and Imaging Technology Diploma**
5. **Dialysis Technician**



FUTURE COURSES:

EMT (Emergency Medical Technicians) in the developed world every ambulance is accompanied by EMT Technician. This is mandatory over there. We plan to implement the same in Pakistan.

MTECH

COLLEGE OF SCIENCE & TECHNOLOGIES

Addressing Educational Challenges in Rural Areas

In rural areas like Bhubhar, Chakwal, access to quality education, particularly in science and technology, remains a significant challenge. Most students from rural regions, despite their talent and potential, find it difficult to pursue advanced education due to the need to relocate to urban centers. This not only adds a financial burden but also disconnects them from their communities. Bin Qutab Foundation, known for its commitment to addressing rural health and educational needs has recognized this gap and is taking a major step to resolve it by establishing MTECH College of Science and Technology.

A Pathway to Progress: MTECH College of Science and Technology

MTECH College of Science and Technology, set to open in October 2024, will provide local students with top-end science and technology education in their own region. By eliminating the need for students to move to cities, the college offers a viable solution that brings world-class education to their doorstep. With modern facilities and a comprehensive curriculum, MTECH will equip rural youth with the skills and knowledge they need to excel in competitive, high-demand fields. The college is in the process of receiving affiliations and approvals from a degree-awarding public sector institution, ensuring that students receive accredited qualifications.

Empowering Rural Communities for a Better Future

The establishment of MTECH College of Science and Technology will have a profound impact on rural communities. By offering accessible education in cutting-edge fields, the college will empower students to contribute meaningfully to their local economy and beyond. Graduates will not only improve their own prospects but will also foster technological innovation and entrepreneurship in their region, ultimately reducing the educational and economic disparity between rural and urban areas. This initiative represents a significant milestone in rural development, aligning with Bin Qutab Foundation's mission of creating sustainable opportunities for the underserved.

MEDICAL EDUCATION (EXPANSION PLAN)

Medical Doctors and Nurses Shortage in Pakistan

In country like Pakistan which has a population of 220 million – a 5th largest country in the world – there is an extreme shortage of Doctors, Nurses and Para- Medics staff. Also, the available Medical Professionals and staff prefer to stay and work in the cities. BQF has focused Health Care projects are in Rural Pakistan, therefore it is very important for BQF to have its own Medical/Nursing/Paramedical College and later even a Medical University. We aim to achieve this by three phased interventions in the field of medical education.

Phase One- College of Para-Medics

As part of our phase one programme, Bin Qutab College of Health Sciences for PARA-Medics is fully functional.

Phase Two- Nursing College (04 Years Degree Programme)

We plan to establish a Nursing College attached to Begum Noor Memorial Hospital, Bubhar (Rural) Chakwal by the end of 2025.

Phase Three- Medical College/University

Once we reach the required threshold of facilities and demand, BQF plans to establish a Medical College/University while BNM Hospital becomes a teaching as well as Medical research Centre where rural youth are trained and educated as qualified doctors. Preference will be given to the youth who is willing to perform their duties in the far-flung areas after graduation.

WHEEL A LIFE PROJECT

(PROVISION OF WHEEL CHAIR & REHABILITATION PROGRAMME FOR SPECIAL PERSONS)

Background

The district of Chakwal, according to the Government of Pakistan census, has the highest number of disabled persons in Pakistan, with 9% of its population affected. This alarming statistic, unique to Chakwal, has not been thoroughly investigated since Pakistan's independence 78 years ago. The reasons behind such a high prevalence of disabilities remain unexplored. This significant oversight has left the disabled community in Chakwal without adequate support or resources for decades. Recognizing the urgent need for intervention, the Wheel A Life Project aims to address the challenges faced by physically disabled individuals and extend comprehensive rehabilitation services to those who are deaf, mute, and blind.

Solution Provided by Bin Qutab Foundation

The Bin Qutab Foundation has launched the '**Wheel A Life Project**' as part of its ongoing commitment to improving the lives of vulnerable communities. The project focuses on two key areas: the provision of wheelchairs to physically disabled persons and the implementation of a holistic rehabilitation program for all special persons, including the deaf, mute, and blind.

So far 1200 Wheel Chairs of costing 20.50 Million has been distributed. Bin Qutab Foundation is moving forward with a target of 15,000 Wheel chairs. (Insha Allah)

Starting in Chakwal, the project will gradually expand its services to cover the entire Rawalpindi district, which includes Chakwal, Jehlum, Rawalpindi, and Attock, as well as the rural areas of Islamabad. This initiative will not only address the physical mobility needs but will also provide tailored rehabilitation services to help these individuals reintegrate into society with dignity and independence.

Outcome of the Project

The Wheel A Life Project is expected to create a significant impact on the lives of disabled persons in the targeted areas. By providing mobility aids such as wheelchairs, it will enhance the independence and quality of life for physically disabled individuals. Moreover, the comprehensive rehabilitation program will empower special persons, offering them the support and skills they need to overcome barriers in communication, mobility, and education. The project's outreach will extend from Chakwal to the entire Rawalpindi district and the rural areas of Islamabad, making it a pioneering effort in addressing the needs of special persons in these regions. Ultimately, this initiative will lay the foundation for a more inclusive and supportive environment for disabled persons, improving their overall well-being and integration into society.

WHEEL CHAIRS DISTRIBUTION



2000 FREE SURGERIES PROJECT **FOR DESERVING PATIENTS**

Background

The population of Chakwal district, like many other districts in Pakistan, faces a severe lack of awareness regarding preventive measures for deadly diseases. People often turn to unqualified practitioners, known as quacks, who administer excessive antibiotics and steroids, damaging vital organs. As a result, patients eventually land in government hospitals with serious conditions. Unfortunately, these government hospitals are overloaded, often operating at fifty times their capacity. Patients diagnosed and in need of surgery are subjected to long waiting times, sometimes ranging from three to four months. This situation prevails even in larger cities, leaving many patients in a dire state. For those who attempt to seek treatment at private hospitals, the high cost of surgery becomes prohibitive, as it is far beyond their financial reach.

Solution:

In response to this critical healthcare gap, Bin Qutab Foundation has launched the "2000 Free Surgeries Project" aimed at offering free surgeries to deserving patients. This initiative is already underway, providing relief to those who have been waiting months for necessary operations. By offering these surgeries free of charge, the foundation seeks to reduce the burden on government hospitals, ensuring that deserving patients receive timely medical attention. This charity-driven initiative is rooted in the foundation's commitment to supporting the underprivileged and providing access to life-saving surgeries that would otherwise be out of reach for them.

Outcome:

The 2000 Free Surgeries Project will significantly lessen the load on overcrowded government hospitals and provide patients with access to crucial surgeries without delay. This timely intervention will not only improve the health outcomes of thousands of patients but also save lives that would have been endangered by prolonged waiting periods. Furthermore, by addressing the gap between demand and capacity in public healthcare, this initiative will have a lasting impact on the healthcare landscape of the Chakwal district, alleviating pressure on public hospitals and offering a sustainable solution to the region's health crisis.

2000
مفت آپریشنز
کا
منفرد پراجیکٹ

بہہٹ چکوال
BEGUM NOOR Memorial Hospital
A Project of BQF

بیگم نور میموریل ہسپتال

آپ کو گل ایپ سے
BNM Hospital
کو انسٹال کر کے
پاسانی اندراج کروا سکتے ہیں۔
ہمارا عملہ خود آپ سے رابطہ کرے گا۔

اگر آپ کو آپریشن کی ضرورت ہے اور مالی مشکلات کی
وجہ سے اپنا علاج کروانے سے قاصر ہیں۔ تو آج ہی
مفت آپریشن کے لئے اپنا اندراج کروائیں۔
بار کوڈ کو بھی سین کیا جاسکتا ہے۔

QR CODE

Contact Us: 0300-0563636, 0300-0407117 & 0300-0407107

دستک شفاء تاک

DASTAK SHIFA TAQ

Rural population screening diagnostics of deadly diseases and treatment through Field Medical Camps and Treatment at Begum Noor Memorial Hospital Bhubhar, Rural Chakwal.

Mobile Hospital

Medical/Eye/Surgical/Gynae Camps with
complete blood screening
(since 1st Jan, 2019 to 31st Dec, 2024)
Total Camps Conducted: 123
Patients Examined: 24177

PROJECT HIGHLIGHTS
The Biri Qutub Foundation proudly presents "Dastak Shifa Taq," a transformative healthcare initiative for underserved communities in Haveli and Islamabad. Through 200 medical camps, the program provides early disease detection, lab tests, surgeries, life-saving treatments, and corrective eye services via a fully equipped mobile hospital. Targeting factory workers, schoolchildren, slum residents, and women, the initiative aims to benefit 100,000 individuals with quality, accessible healthcare.

- To deliver equitable, high-quality healthcare services to all individuals regardless of financial status, religion, or sect, with unwavering compassion and fairness.
- To enable early disease detection, preventing progression into complex conditions that cause substantial physical, financial, and systemic burdens.
- To provide accessible healthcare directly to those unable to afford or reach medical facilities.
- To promote the understanding that prioritizing health is a necessary, not a choice.

ADVANCE TREATMENT
Patients with life-threatening symptoms at medical camps will be referred to a panel of specialists. Based on their recommendations, appropriate care—such as surgery, specialized treatment, or tertiary hospital admission will be promptly initiated. This systematic approach ensures timely intervention and access to advanced medical care, optimizing outcomes for critical cases.

KEY MILESTONES
DIAGNOSED
LIVER DISEASES, HIV/AIDS, HEP. D & C, MALARIA, TYPHOID, ETC
TREATMENT
SURGERIES
ENT-GYNAE GENERAL, EYE
SCHOOL CHILDREN SCREENING
EYE, DENTAL, UNDER-OUR-WEIGHT ISSUES

COLLABORATION & PARTNERS
SPOGOMI WORLD CUP
Environmental project with Nippon Foundation, Japan with support of Gulberg Citizens, Source Textile & relevant pharmaceuticals
NATIONAL TB PROGRAMME
National TB Programme
Partner of Govt of Pakistan in National TB Control Programme
QAJMI SEHAT CARD
Partner of Govt of Pakistan in Qajmi Sehat Card
IHTC ISLAMABAD
Manage and operate isolation hospital and infection Treatment Center with NMA in Chak-Shahdrol Islamabad
PARTNER OF CHAKWAL POLICE AND DISTRICT BAR
Provision of health-care services health-care services to Chakwal Police and District Bar
LIONS CLUB-LAHORE
Partner of Lions club Lahore for provision of door-to-door treatment to Rural Communities
ROTARY CLUB-LAHORE MODEL TOWN
Partners of Rotary Club Lahore Partners, Model Town in different healthcare projects

CONTACT & DETAILS
0315 2003522 - 0315 2003525
@BQFoundation | www.bqfoundation.org | BQFoundation

Preventive Health care Sessions are also given to Local Communities during this Out Reach Programme.

50,000 PLUS CRONA VACCINATION PROGRAMMES

Background:

During the COVID-19 pandemic, Chakwal district faced significant challenges in managing the overwhelming demand for vaccinations. The district government struggled with a shortage of facilities and infrastructure to handle the heavy load of vaccinations required to protect the population. In this difficult situation, the District Management approached us at Begum Noor Memorial Hospital, Bhubhar, Chakwal, the largest and most modern healthcare facility in the rural area, for assistance.

Solution:

Recognizing the urgency of the situation, we at Begum Noor Memorial Hospital agreed to share the burden and support the district administration in managing the vaccination campaign. Our hospital stepped forward by utilizing its infrastructure, resources, and medical staff to ensure that the vaccination process ran smoothly. We set up dedicated vaccination centers, managed the influx of patients, and ensured that all COVID-19 protocols were strictly followed to protect both patients and staff.

Outcome:

As a result of our timely intervention, more than 50,000 individuals were successfully vaccinated during the program. This collaborative effort not only alleviated the burden on the district's health system but also ensured that the affected individuals received their vaccinations promptly and safely. Our support contributed to controlling the spread of the virus and protecting the rural population during a critical period of the pandemic.

ENVIRONMENTAL AWARENESS **SPOGOMI PAKISTAN**

SPOGOMI WORLD CUP TOKYO JAPAN 2023

We are thrilled to share the resounding success of the first SPOGOMI World Cup Tokyo Japan-Pakistan stage, held in Lahore on September 24, 2023, at the Model Town Housing Society. This landmark event, held in collaboration with the esteemed Nippon Foundation Japan, marked a historic moment for Pakistan and highlighted our commitment to environmental protection.

A total of 30 teams representing various walks of life enthusiastically participated in this colorful and eco-friendly activity, demonstrating their passion for a clean and green future. The joint efforts of the Nippon Foundation Japan and Bin Qutub Foundation Pakistan brought together communities and individuals in a united front against environmental challenges.

The event was not only a celebration of environmental awareness but also a platform for friendly competition. The winning teams earned the honor of representing Pakistan in the World Cup finals in November 2023. This global stage, held in Tokyo, Japan, will provide our champions with the opportunity to showcase our nation's passion and commitment on an international platform.



FUTURE PROJECTS

PATIENT FOLLOW UP CLINIC

Introducing the "Patients Follow-up Clinic," a pioneering initiative designed to address a critical gap in healthcare for rural areas, where literacy levels are often low, and patients may struggle to fully understand and adhere to medical guidance. In many rural regions, patients and their family members may be unfamiliar with complex medical instructions, leading to improper medication use or non-adherence, which can hinder recovery. Recognizing this challenge, our new service will provide essential follow-up care, ensuring that patients receive the support they need, even after they leave the hospital.

Three days after a patient's visit to the hospital, our trained staff will make a phone call to the patient or their attending family member to inquire about their well-being. This call will focus specifically on understanding how the patient is taking the prescribed medication and whether they are following the doctor's instructions accurately. Often, patients in rural areas are not fully aware of the importance of adhering to medical advice, and this follow-up ensures that they remain aligned with the treatment plan for their safety and well-being.

If it is found during these calls that the patient is not following the prescribed guidelines, our team will take immediate action. We will provide clear and simple instructions again, ensuring that both the patient and their family understand the importance of compliance for the best possible outcome. This proactive approach will help prevent complications that can arise from improper medication use or misunderstandings about the treatment plan.

In cases where the follow-up call indicates a more serious concern, our paramedic staff will be available to visit the patient's home. This home visit will not only reassure the patient and their family but also provide an opportunity for direct medical support and guidance. By offering this additional level of care, we ensure that patients feel supported even after they leave the hospital, reducing their anxiety and improving their health outcomes.

The "Patients Follow-up Clinic" is an innovative service, the first of its kind in rural Pakistan. By addressing the unique challenges faced by patients in these areas, we are setting a new standard in rural healthcare. This initiative reflects our commitment to patient safety and the well-being of the community, ensuring that every patient receives the follow-up care they need for a smooth recovery.

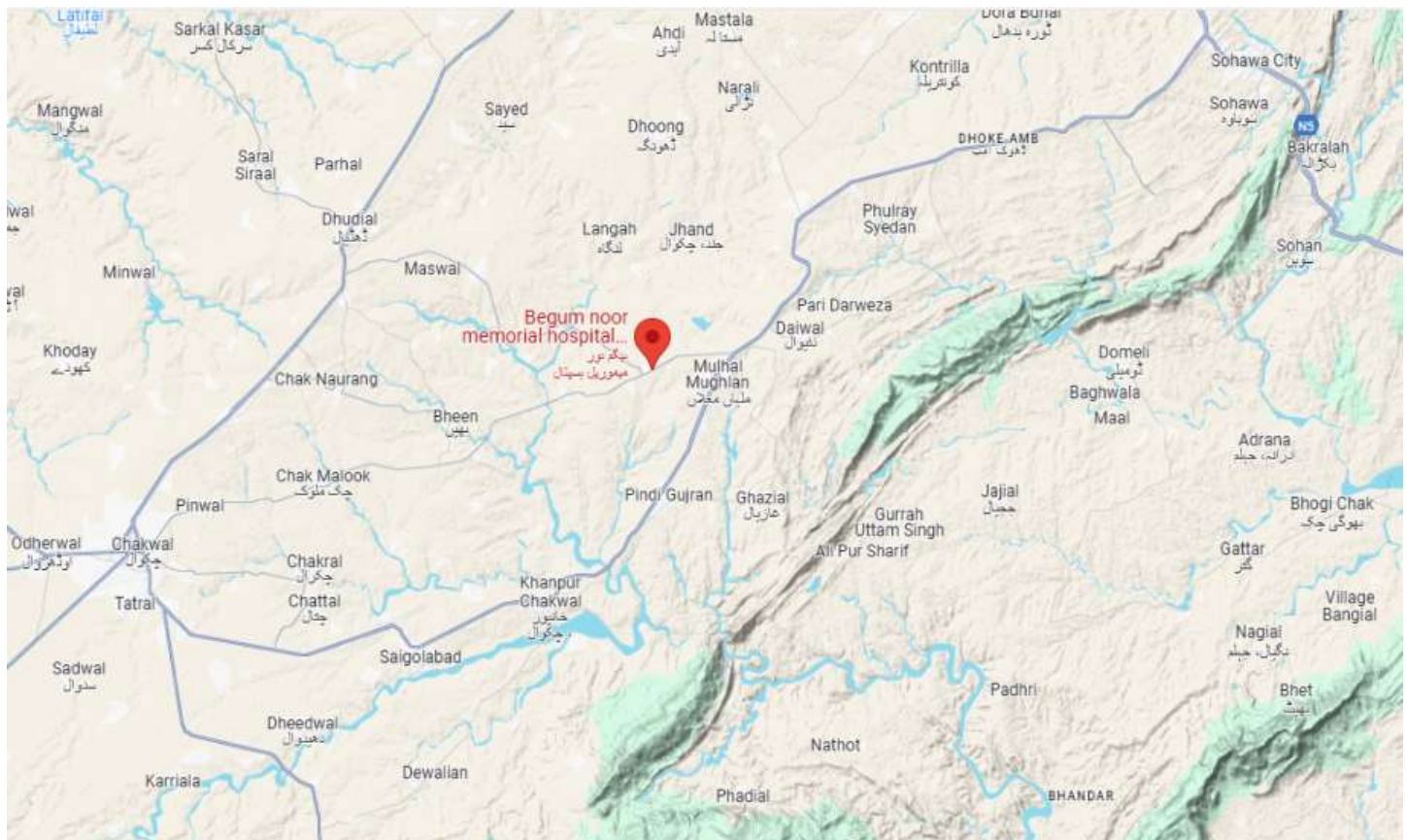
SHUTTLE SERVICE

Within 50 to 70 Kilometer Area around Hospital.

Unfortunately, the areas surrounding the hospital, spanning 50 to 60 kilometers, lack reliable public transportation, leaving patients dependent on unsafe options like rickshaws and dingis. These vehicles are not only prone to accidents but are also unsuitable for elderly patients, pregnant women, and those with severe medical conditions, especially given the hilly terrain and damaged roads.

To address this critical issue, we plan to introduce a shuttle service on seven key routes around the hospital. This service will ensure safe and timely transportation for patients, especially those who face challenges in accessing our hospital through the existing means. By providing a safer and more reliable transport solution, we aim to improve the overall healthcare experience for the rural population.

Google map as following of the area:



Telemedicine Clinic Project (TCP)

Chakwal district, with its 87% rural population, faces significant challenges in providing timely and quality healthcare to its scattered villages. Setting up traditional small or medium-sized hospitals in these remote areas is logistically difficult and financially burdensome. The Telemedicine Clinic Project (TCP) offers a viable solution to bridge this gap. Through this initiative, we plan to establish telemedicine clinics strategically located in rural areas, all connected to our main hospital at Bhubhar, Chakwal.

These telemedicine clinics will leverage technology to provide remote consultations, diagnostics, and follow-up care. Patients in distant villages will have access to qualified doctors and specialists without the need to travel long distances. With the support of trained local paramedics and nurses, these clinics will facilitate real-time virtual consultations, ensuring that essential medical advice and prescriptions are delivered efficiently. This model will not only save time and resources for rural patients but also significantly improve health outcomes by making healthcare accessible to those who need it the most.

By integrating these clinics with our hospital's existing infrastructure, we aim to provide comprehensive, continuous care to rural communities.



The Satellite Nursing Homes Programme (Islamabad & Rawalpindi Cities)

Background:

The Struggles of Poor Patients and Families The Satellite Nursing Homes Programme addresses the dire needs of underprivileged families who travel long distances, often from 200 to **200** kilometers, to seek treatment for their loved ones in tertiary care hospitals in Rawalpindi and Islamabad. While wealthier families can afford accommodation in rest houses and hotels, these poor families, already burdened by debt and the sale of their assets, face the challenge of finding a place to stay when doctors request follow-up visits after a day or two. Without affordable lodging options, these families endure immense hardship as they attempt to care for their patients.

Solution:

Establishing **Satellite Nursing Homes** Bin Qutab Foundation proposes to setup five nursing homes along key routes and roads connecting the northern and southern populations visiting these hospitals. These nursing homes will offer free-of-cost services to patients and their attendants, including overnight stays, meals, paramedic care and safe transportation back to the hospital the next day. By providing a comfortable place to stay, medical support, and meals, the programme will remove the financial burden & hardship of frequent trips and accommodations for these struggling families.

Outcome:

A Lifeline for Vulnerable Families The Satellite Nursing Homes Programme will bring much-needed relief to families who face emotional and financial stress due to medical emergencies. By offering free services, the programme ensures that poor patients and their attendants have a safe, supportive space to rest, receive care, and continue their treatment without worrying about the cost of accommodation or transportation. This initiative promotes healthcare access and equality, providing a lifeline to the most vulnerable in our society.

Research on Disabled and Special Persons in Chakwal District

Background

Chakwal district has the highest percentage of disabled and special persons in Pakistan, according to the Government of Pakistan census, where 9% of the population is disabled. Despite this alarming figure, no comprehensive research has been conducted to identify the underlying reasons for this high rate of disability. To address this gap, we aim to collaborate with universities, research institutions, and development organizations to initiate a thorough investigation into the factors contributing to this issue.

Proposed Solution

Our solution is to launch a detailed research project that will focus on understanding the causes behind the high prevalence of disability in Chakwal. We will involve experts from various fields to gather data and analyze trends. This research will identify both genetic and environmental factors that may be contributing to the problem. The involvement of educational and healthcare institutions will ensure that the study is thorough and covers all aspects related to disability in the region.

Expected Outcome

Based on the findings of this research, we will develop a comprehensive preventive program aimed at reducing the rate of disability in the district. This will include suggestions from healthcare professionals, genetic experts, and environmental scientists. The preventive program will address key areas such as early diagnosis, public awareness, healthcare interventions, and policy recommendations for local and national governments. Ultimately, this initiative will pave the way for improving the quality of life for disabled and special persons in Chakwal.

Socio-Economic Impact of Begum Noor Memorial Hospital and its Programs **(3RD PARTY REPORT)**

Background

In rural Pakistan, there is a critical gap in healthcare infrastructure. Government healthcare facilities are limited to Basic Health Units (BHUs) and Rural Health Centers (RHCs), which are often understaffed and under-resourced. Larger hospitals such as Tehsil Headquarters (THQ) or District Headquarters (DHQ) hospitals are located in semi-urban or urban areas, often far from rural populations. The distance to quality healthcare facilities can range from 50 to 300 kilometers, making it difficult for the rural population to access essential medical services. Moreover, private hospitals are either small individual setups or driven by profit motives, failing to cater to the healthcare needs of the broader population.

Recognizing this gap, the Bin Qutab Foundation established Begum Noor Memorial Hospital (BNMH) in the rural district of Chakwal, bringing top-of-the-line healthcare services to an underserved population. BNMH not only offers medical services but also contributes to medical education and technological advancement in the region. It includes medical training programs and the forthcoming MTECH College of Science and Technology, focused on providing high-quality education in healthcare and science to rural students.

This hospital is a unique institution, providing advanced healthcare services in a region that previously had limited access to specialized medical treatment. Its multi-specialty care, free surgeries for the underprivileged, telemedicine clinics, and other innovative healthcare solutions are transforming lives. However, the real impact of this hospital needs to be quantified to evaluate the socio-economic changes it has brought to the region.

Proposed Solution

To assess the socio-economic impact of Begum Noor Memorial Hospital and its programs, a comprehensive third-party survey is proposed. The survey will be conducted by experts specializing in healthcare impact analysis and rural socio-economic development. This survey will help quantify the tangible and intangible benefits that BNMH has provided to the local community, including improvements in health outcomes, economic opportunities, education, and overall quality of life.

Key Areas of the Study

Healthcare Accessibility: The survey will analyze how BNMH has improved access to healthcare for rural communities, focusing on the reduction in travel time, the number of patients treated, and the variety of medical services offered. It will also consider the impact of telemedicine services in connecting remote areas to specialized healthcare professionals.

Health Outcomes

The study will assess the improvement in health metrics, such as reduced mortality rates, increased life expectancy, and better management of chronic diseases due to the hospital's presence. The success of free surgeries for the underprivileged will also be analyzed.

Economic Impact

BNMH's contribution to the local economy, both directly and indirectly, will be evaluated. This includes job creation in the healthcare sector, the impact on local businesses due to increased traffic from patients, and cost savings for families who no longer have to travel long distances for medical care.

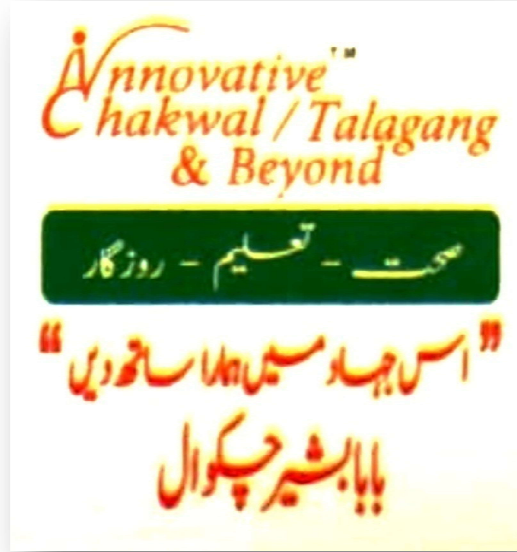
Education and Training: The survey will look at how the medical education programs and the establishment of MTECH College have impacted the local population. The role of BNMH in providing career opportunities in healthcare and science and technology for rural youth will be a key focus area.

Social Empowerment: The hospital's impact on the social fabric of the community will also be considered. This includes how it has improved the quality of life for disabled persons through rehabilitation services, and its role in empowering women by offering employment opportunities and healthcare services.

Expected Outcome: The survey will provide a detailed report on the socio-economic impact of BNMH. It will highlight the areas where the hospital has made a significant difference and recommend areas for further improvement. The findings will be used to inform future healthcare and education programs at BNMH and guide the expansion of similar projects to other rural areas.

In conclusion, Begum Noor Memorial Hospital stands as a beacon of hope for rural communities, addressing a significant healthcare void in the region. This third-party survey will be critical in demonstrating the far-reaching socio-economic benefits of such initiatives and will serve as a model for future rural healthcare interventions in Pakistan.





INNOVATIVE

TALAGANG and BEYOND.

CHAKWAL

(Extension of Services of Health - Education – Livelihood in whole of Potohar Region focusing on Rawalpindi Division districts Jehlum, Rawalpindi, attock and Chakwal including ISLAMABAD RURAL)

Background:

Bin Qutab Foundation (BQF) has been actively working in health care, education, and livelihood sectors, primarily serving the underprivileged communities in Chakwal and Talagang. Our efforts are now expanding to encompass the entire Potohar region, with a specific focus on the districts of Jehlum, Rawalpindi, Attock, Chakwal, and the rural areas of Islamabad. These regions face similar socioeconomic challenges, particularly in terms of healthcare, education, and unemployment, making it essential for us to broaden our outreach.

Purpose:

The aim of this initiative is to extend BQF's services across the Potohar region to address critical issues like healthcare access, educational opportunities, and livelihood support. We have already distributed free wheelchairs in parts of Jehlum and Rawalpindi's rural areas, while our mobile hospital is reaching those in need of healthcare services in these locations.

Additionally, we are launching a significant project to address unemployment, focusing on the estimated 700,000 jobless individuals in Chakwal and

Talagang. Our research suggests that there are approximately 2.5 million jobless people across the entire Rawalpindi division. This project seeks to bring together various stakeholders, including local businesses, corporate sectors, non-governmental organizations, chambers of commerce, government bodies, district governments, parliamentarians, notables, opinion movers and the media, to pool resources and create sustainable solutions to the joblessness crisis.

Solution Approach:

Short-term goals: Immediate focus on vocational training, skill development programs, and small business startups for the unemployed youth.

Long-term vision: Developing a self-sustaining ecosystem of employment through partnerships with the corporate sector and promoting entrepreneurship.

Stakeholders' Roles:

1. Government Bodies: Provide policy support, incentives for businesses, and infrastructure development.
2. Local Businesses & Corporate Sector: Invest in skill development programs, offer internships, and fund small enterprises.
3. Non-governmental Organizations: Collaborate in training programs and job creation initiatives.
4. Media: Amplify the issue and success stories, ensuring awareness and community engagement.

The collective effort of these stakeholders is crucial for creating a framework that provides both immediate relief and long-term sustainability for addressing the unemployment problem in the Potohar region.

BANKING DETAILS

BANK	ACCOUNT TYPE	TITLE	ACCOUNT #	IBAN
MEEZAN BANK LTD	DONATION	BIN QUTAB FOUNDATION	0245-0102865666	PK74 MEZN 0002 4501 0286 5666
UNITED BANK LTD	DONATION	BIN QUTAB FOUNDATION	0962-01128128	PK22 UNIL 0112 0962 0112 8128
BANK ALFALAH ISLAMI	ZAKAT	BIN QUTAB FOUNDATION	5501-5000425583	PK89ALFH5501005000425583

OTHER ACCOUNTS

Jazz Cash 0300-0407082



Bin Qutab Foundation
Audited Financial Statements
For the year ended 30 June 2024

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF BIN QUTAB FOUNDATION
REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS**

Opinion

We have audited the annexed financial statements of Bin Qutab Foundation (the Organization), which comprise the statement of financial position as at June 30, 2024 and the related statement of income and expenditure, the statement of changes in funds, the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of material accounting policies and other explanatory information, and we state that we have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purposes of the audit.

In our opinion and to the best of our information and according to the explanations given to us, the statement of financial position, statement of income and expenditure, the statement of changes in funds and the statement of cash flows together with the notes forming part thereof conform with the accounting and reporting standards as applicable in Pakistan and give the information required by the Companies Act, 2017 (XIX of 2017), in the manner so required and respectively give a true and fair view of the state of the Organization's affairs as at June 30, 2024 and of the surplus, the changes in funds and its' cash flows for the year then ended.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code) and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other Than The Financial Statements And Auditor's Report Thereon

Management is responsible for the other information. The other information comprises of the information included in the annual report but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise

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appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information; we are required to report that fact. We have nothing to report in this regard.

Responsibilities Of Management And Board of Directors For The Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the accounting and reporting standards as applicable in Pakistan and the requirements of Companies Act, 2017 (XIX of 2017) and for such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Board of directors are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities For The Audit Of The Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs as applicable in Pakistan will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of the internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material

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uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board of Directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Report On Other Legal And Regulatory Requirements

Based on our audit, we further report that in our opinion:

- a) proper books of account have been kept by the Organization as required by the Companies Act, 2017 (XIX of 2017);
- b) the statement of financial position, the statement of income and expenditure, the statement of changes in funds and the statement of cash flows together with the notes thereon have been drawn up in conformity with the Companies Act, 2017 (XIX of 2017) and are in agreement with the books of account and returns;
- c) investments made, expenditure incurred and guarantees extended during the year were for the purpose of the Organization's business; and
- d) no zakat was deductible at source under the Zakat and Ushr Ordinance, 1980(XVIII of 1980).

Engagement partner on the audit resulting in this independent auditor's report is Bushra Sana.

Ilyas Saeed by h.

Ilyas Saeed & Co. ISCO
Chartered Accountants
Lahore.

Date: December 19, 2024

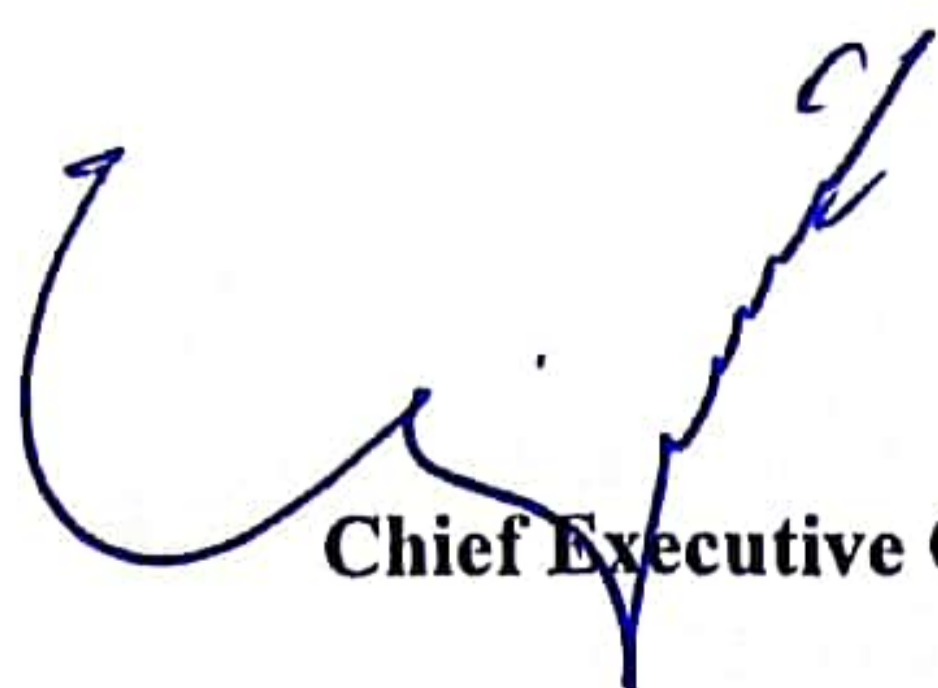
UDIN: AR202410278axUZVHpWS

**BIN QUTAB FOUNDATION
STATEMENT OF FINANCIAL POSITION
AS AT JUNE 30, 2024**

ASSETS	NOTE	2024 RUPEES	2023 RUPEES
NON CURRENT ASSETS			
Property, plant and equipment - unrestricted	4	132,461,168	139,400,883
Intangible assets	5	421,134	498,866
Capital work in progress - unrestricted	6	20,869,520	11,607,571
Long term deposits	7	76,600	176,600
		153,828,422	151,683,920
CURRENT ASSETS			
Loans and advances - unsecured	8	4,678,471	3,018,127
Advance income tax	9	2,905,911	332,367
Short term investmnet	10	20,000,000	-
Cash and bank balances	11	28,561,370	14,021,907
		56,145,752	17,372,400
TOTAL ASSETS		209,974,174	169,056,320
FUNDS AND LIABILITIES			
FUNDS			
General / unrestricted fund	SOCF	195,862,273	160,558,373
		195,862,273	160,558,373
CURRENT LIABILITIES			
Accrued and other liabilities	12	10,043,160	6,141,517
Project - dialysis center	13	2,428,275	-
Short term borrowings	14	1,640,466	2,356,431
		14,111,901	8,497,948
CONTINGENCIES AND COMMITMENTS	15	-	-
TOTAL FUNDS AND LIABILITIES		209,974,174	169,056,320

The annexed notes from 1 to 29 form an integral part of these financial statements.
ISCO


Chief Financial Officer


Chief Executive Officer


Chairman

**BIN QUTAB FOUNDATION
STATEMENT OF INCOME AND EXPENDITURE
AS AT JUNE 30, 2024**

PARTICULARS	NOTE	2024	2023
		RUPEES Unrestricted	RUPEES Unrestricted
INCOME			
Donations / receipts	16	215,897,414	166,680,626
Other receipts	17	1,669,740	334,526
		217,567,155	167,015,152
EXPENDITURE			
Operating expenses	18	(165,269,321)	(131,172,717)
Administrative expenses	19	(18,980,316)	(19,245,755)
Finance costs	20	(264,002)	(255,538)
		(184,513,640)	(150,674,010)
Other income	21	-	7,231
SURPLUS / (DEFICIT) FOR THE YEAR		33,053,515	16,348,373

The annexed notes from 1 to 29 form an integral part of these financial statements.

ISCO



Chief Financial Officer



Chief Executive Officer



Chairman

BIN QUTAB FOUNDATION
STATEMENT OF CHANGES IN FUNDS
AS AT JUNE 30, 2024

PARTICULARS	GENERAL FUND	CAPITAL FUND	TOTAL
	------(RUPEES)-----		
	Unrestricted	Unrestricted	Unrestricted
Balance as at July 01, 2022	119,201,982	16,153,061	135,355,043
Addition during the year (in kind)	5,244,357	3,610,600	8,854,957
Surplus for the year	16,348,373	-	16,348,373
Balance as at June 30, 2023	140,794,712	19,763,661	160,558,373
Addition during the year (in kind)	897,185	1,353,200	2,250,385
Surplus for the year	33,053,515	-	33,053,515
Balance as at June 30, 2024	<u>174,745,412</u>	<u>21,116,861</u>	<u>195,862,273</u>

The annexed notes from 1 to 29 form an integral part of these financial statements.

ISCO



Chief Financial Officer



Chief Executive Officer



Chairman

**BIN QUTAB FOUNDATION
STATEMENT OF CASH FLOWS
AS AT JUNE 30, 2024**


PARTICULARS	NOTE	2024 RUPEES	2023 RUPEES
CASH FLOW FROM OPERATING ACTIVITIES			
Surplus / (deficit) for the year		33,053,515	16,348,373
Adjustments for:			
Depreciation for the year		13,616,438	12,988,256
Amortization for the year		77,732	77,732
Loss on disposal of vehicle		96,359	3,750
Cash flow before changes in working capital		46,844,044	29,418,111
Working capital changes:			
Decrease / (Increase) in Loans and advances		(1,660,344)	6,806,264
Decrease / (Increase) Project - dialysis center		2,428,275	-
(Decrease)/ Increase in Creditors and other accruals		3,901,644	(7,636,912)
Net working capital changes		4,669,574	(830,648)
Cash flow from operations		51,513,618	28,587,463
Taxes paid - net		(2,573,544)	(82,178)
Net cash flows from operating activities		48,940,074	28,505,286
CASH FLOWS FROM INVESTING ACTIVITIES			
Fixed assets purchased		(6,773,082)	(31,507,571)
Short term investmnet		(20,000,000)	-
Proceeds from disposal of vehicle		-	950,000
Capital work in progress		(9,261,949)	(6,164,485)
Long term deposits		100,000	-
Net cash flows from investing activities		(35,935,031)	(36,722,056)
CASH FLOWS FROM FINANCING ACTIVITIES			
Donations received during the year		2,250,385	8,854,957
Increase / (Decrease) in short term financing		(715,965)	1,206,431
Net cash flows from financing activities		1,534,420	10,061,388
Net increase / (decrease) in cash and cash equivalents		14,539,463	1,844,618
Cash and cash equivalents at the start of the year		14,021,906	12,177,289
CASH AND CASH EQUIVALENTS AT END OF YEAR		28,561,370	14,021,906

The annexed notes from 1 to 29 form an integral part of these financial statements.

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Chief Financial Officer


Chief Executive Officer


Chairman

BIN QUTAB FOUNDATION
NOTES TO THE FINANCIAL STATEMENTS
AS AT JUNE 30, 2024

1 CORPORATE AND GENERAL INFORMATION

1.1 LEGAL STATUS AND OPERATIONS

Bin Qutab Foundation (the 'Foundation') was incorporated on June 12, 2007 as an association under section 42 of the repealed Companies Ordinance, 1984 (now, the Companies Act, 2017). The registered office of the Foundation is situated at 407-A-1, Gulberg-III, Lahore. The main object of the Foundation is to aid, assist, set up, maintain, administer and run hospitals, nursing homes, mother & child care centers, clinics, dispensaries, immunization and vaccination centers and places of medical aid, convalescent homes, family planning centers, x-ray clinics, radio therapy centers, pathological and clinical laboratories, blood banks, eye banks or other centers connected with the care of the human body. Currently, the Foundation is running "Begum Noor Memorial Hospital (BNMH)" in Chakwal. The area of land on which the hospital is situated is 15 Kanals. The hospital is duly registered under the Punjab Health Care Commission. The Foundation obtained license to operate as a non-profit-organization from the Securities and Exchange Commission of Pakistan which was valid till 31-12-2020. The Foundation applied for renewal of license however, the Securities and Exchange Commission of Pakistan vide Notification # S.R.O. 1574(1)/2021 dated November 29, 2021 made the amendments to the Association with Charitable and Not For Profit Objects Regulations, 2018 and according to the said Notification, license once granted according to section 42 of the Companies Act, 2017, is no more required to be renewed.

2 STATEMENT OF COMPLIANCE

2.1 These financial statements have been prepared in accordance with the Approved Accounting Standards as applicable in Pakistan. Approved Accounting Standards comprise of such International Financial Reporting Standards and the Accounting Standards for Not For Profit Organizations (NPOs) issued by the Institute of Chartered Accountants of Pakistan, as are notified under the Companies Act, 2017 (the Act) and the provisions of and directives issued under the Companies Act, 2017. Where provisions of and / or directives issued under the Companies Act, 2017 differ from the requirements of IFRSs for NPOs, the provisions of or directives issued under the Companies Act, 2017 have been followed.

2.2 NEW AND AMENDED STANDARDS AND INTERPRETATIONS BECOME EFFECTIVE

The following revised standards, amendments and interpretations with respect to the approved accounting standards, as applicable in Pakistan, become effective during current year:

IFRS 16 – Leases - Lease Liability in a Sale and Leaseback

However, this adoption has no impact on the financial statements of the Foundation.

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2.3 STANDARDS, INTERPRETATIONS AND AMENDMENTS TO PUBLISHED APPROVED ACCOUNTING STANDARDS THAT ARE NOT YET EFFECTIVE

The following standards, amendments and interpretations with respect to the approved accounting standards, as applicable in Pakistan, would be effective from the dates mentioned below against the respective standard or interpretation:

Standard or Interpretation		Effective Date (Annual periods beginning on or after)
IAS 1	Amendments to IAS 1 'Presentation of Financial Statements'- (Amendments)	January 1, 2024
IAS 7	Amendments to IAS 7 "Statement of Cash Flows"	January 1, 2025
IAS 21	The effects of Changes in Foreign Exchange Rates (Amendments)	January 1, 2024
IFRS 7	Amendments to IFRS 7 "Financial Instruments Disclosures" - Supplier Finance Arrangements	January 01, 2024
IFRS 7 & 9	Amendments to Classification and Measurement of Financial Instruments - Amendments to IFRS 7 and IFRS 9	January 01, 2026
IFRS 16	Amendments to IFRS 16 ' Leases' - clarification on how seller-lessee subsequently measures sale and leaseback transactions.	January 1, 2024

2.3.1 In addition to the above standards and amendments, improvements to various accounting standards have also been issued by the IASB during previous years. Such improvements are generally effective for accounting periods beginning on or after January 01, 2022 and January 01, 2023 respectively. The Foundation expects that such improvements to the standards will not have any significant impact on the Foundation's financial statements in the period of initial application or thereafter.

Standard or Interpretation

IFRS - 17 - Insurance Contracts

The Foundation expects that the adoption of the above standard will have no material effect on the Foundation's financial statements.

3 SUMMARY OF MATERIAL ACCOUNTING POLICIES

These financial statements have been prepared under the historical cost convention except as otherwise stated in the respective policies / notes. These accounts have been prepared under accrual basis of accounting except for cash flow information.

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The preparation of financial statements is in conformity with the requirements of International Financial Reporting Standards for Not For Profit Organization (IFRS for NPOs) as issued by the International Accounting Standards Board (IASB) as notified by the Securities & Exchange Commission of Pakistan as adopted by the Institute of Chartered Accountants of Pakistan.

3.1 ESTIMATES & JUDGMENTS

These standards require the management to make judgments, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, income and expenses. The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the results of which form the basis of making the judgments about carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the year in which the estimate is revised if the revision affects only that year or in the year of the revision and future years if the revision affects both current and future years.

Significant areas requiring the use of management estimates in these financial statements relate to the useful life of depreciable assets, amortization and provision for taxation. However, assumptions and judgments made by management in the application of accounting policies that have significant effect on the financial statements are not expected to result in material adjustment to the carrying amounts of assets and liabilities in next year.

3.2 PROPERTY, PLANT & EQUIPMENT

3.2.1 OWNED

All the Property, Plant and Equipment have been valued at cost less accumulated depreciation and accumulated impairment losses (if any) except Freehold Land and Capital Work In Progress which are stated at cost. Cost includes purchase price and all incidental expenses incurred up to the date the asset is put to use. The Capital Work In Progress is transferred to fixed assets as and when assets are available for intended use. All expenses including borrowing costs, if any, as per IAS-23, will be capitalized at the time when these assets will start commercial production.

Depreciation on property, plant and equipment is charged as an expense on reducing balance method over its estimated useful life so as to write off the historical cost of an asset at the rates specified. Depreciation on additions is charged on the basis of number of days commencing from the day at which assets becomes available for use and on disposals, depreciation is charged up to the date of deletion. The assets' residual values and useful lives are reviewed at each financial year end and adjusted if impact on depreciation is significant.

Subsequent costs are included in the asset's carrying amount or recognized as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will

flow to the Foundation and the cost of the item can be measured reliably. All other repairs and maintenance costs are charged as an expense during the period in which they are incurred.

An item of property, plant and equipment is derecognized upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the asset (calculated as the difference between the net disposal proceeds and carrying amount of the asset) is included in the other income / expense in the year the asset is derecognized.

3.3 CAPITAL WORK IN PROGRESS

This represents cost / expenditures, if any, incurred on non-current assets during the installation / erection period. These are transferred to property, plant and equipment as and when the assets are available for use.

3.4 INTANGIBLE ASSETS

Intangible assets are stated at cost less accumulated amortization and accumulated impairment losses, if any. Intangible assets are amortized on a straight-line basis over their estimated useful lives.

Costs that are directly associated with identifiable software products controlled by the Foundation and have probable economic benefit beyond one year are recognized as intangible assets. Cost associated with maintaining computer software products are recognized as expense as and when incurred.

3.5 IMPAIRMENT OF ASSETS

An assessment is made at each statement of financial position date to determine whether there is any indication of impairment or reversal of previous impairment, including items of property, plant and equipment and intangible assets. In the event that an asset's carrying amount exceeds its recoverable amount, the carrying amount is reduced to recoverable amount and an impairment loss is recognized in the statement of receipt and expenditure. A previously recognized impairment loss is reversed only if there has been a change in the estimates used to determine the recoverable amount, however, not to an amount higher than the carrying amount that would have been determined (net of amortization or depreciation), had no impairment losses been recognized for the asset in prior years.

3.6 LONG TERM DEPOSITS

Long term deposits are stated at cost and are refundable or adjustable on maturity to the Foundation.

3.7 LOAN AND ADVANCES

Receivables are carried at original invoice amount less on estimates for doubtful receivable balances based on review of outstanding amounts at the year end. Bad debts are written off when identified.

3.8 CASH & CASH EQUIVALENTS

Cash and cash equivalents are carried in the statement of financial position at cost. For the purpose of statement of cash flows, cash and cash equivalents comprise cash in hand, cash with banks on current and saving accounts and revolving fund as imprest account.

3.9 OFFSETTING

Financial assets and liabilities are offset and the net amount is reported in the statement of financial position if, the Foundation has a legally enforceable right to set-off the recognized amounts and the Foundation intends to settle either on a net basis or realize the asset and settle the liability simultaneously.

3.10 TRADE & OTHER PAYABLES

Liabilities for payables are initially recognized at fair value which is normally the transaction cost.

3.11 EMPLOYEE BENEFITS SCHEME

The Foundation is operating an un-recognized provident fund scheme for all permanent employees. Equal contributions are made by employees and the Foundation at the rate of 8.33 percent of basic salary per month.

3.12 TAXATION

The Foundation is duly approved as Non-Profit Foundation under section 2(36) of the Income Tax Ordinance, 2001. The Foundation is allowed tax credit equal to one hundred percent of the tax payable including minimum tax and final taxes payable, under section 100C of the Income Tax Ordinance, 2001.

3.13 INCOME

3.13.1 UNRESTRICTED / GENERAL FUND

Donations and other contributions are recognized as income on receipt basis.

3.13.2 RESTRICTED FUND

The Foundation has adopted the restricted fund method and multi column format for fund accounting whereby a separate column is assigned to each specific purpose fund. During the year, the Foundation has not received any restricted fund.

3.14 RELATED PARTY TRANSACTIONS

All transactions with related parties are made at arm's length prices determined in accordance with comparable uncontrolled price method. Parties are said to be related if they are able to influence the operating and financial decisions of each other.

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The related parties and associated undertakings comprise associated companies, companies in which directors are interested, staff retirement funds, directors and key management personnel.

3.15 CONTINGENCIES AND COMMITMENTS

Contingencies and commitments are accounted for when these become due.

3.16 SEGMENT REPORTING

Segment reporting is based on the operating segments of the Foundation. An operating segment is a component of the Foundation that engages in business activities from which it may earn revenues and incur expenses, including revenues and expenses that relate to the transactions with any of the Foundation's other components. An operating segment's operating results are reviewed regularly by the Chief Executive Officer to make decisions about resources to be allocated to the segment and assess its performance and for which, discrete financial information is available.

3.16.1 OPERATING SEGMENTS

a) BEGUM NOOR MEMORIAL HOSPITAL

The hospital is providing quality services in the fields of Mother Child Health Care including Gynecology, Incubators for the New Born, OBS, 24/7 Emergency Services, Digital X-Ray with CSR System, 3 Operation Theatres, Minor OT, General Surgery, Pharmacy, Modern and Hi-Tech Diagnostic Laboratory, Multi-Specialty OPD, ICU, NICU, Kidney Dialysis, Disabled Rehab and Medical Consultant Services through various wards of Male, Female and Children, Dental Care, Dermatology, ENT, Eye, ECG, Ultrasound, Gastroenterology. Apart from that, the Foundation is also facilitating the patients through ambulance services and a shuttle service facilitating patients to come to the hospital from far flung areas.

b) ISOLATION HOSPITAL AND INFECTIONS TREATMENT CENTER

The Foundation entered into an agreement with National Disaster Management Authority (NDMA) for provision of management and advisory services with regard to Isolation Hospital and Infections Treatment Center - IHITC, Islamabad, a health care facility purposefully established to build the nations' response and resilience against COVID-19 pandemic and other infectious diseases. Under the agreement, the Foundation is required to work in collaboration with its global health partner "Doctors Worldwide" with regard to operational planning and execution, provide services of Clinical and Non-Clinical Staff and their training, quality healthcare delivery and administration of the IHITC. The Foundation served as the intermediary technical support body for NDMA to operate IHITC. The aforesaid agreement expired on 31st December 2021.

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4 PROPERTY PLANT AND EQUIPMENT - UNRESTRICTED

PARTICULARS	2024					2023					W.D.V. As At June 30, 2024	
	COST		Rate	DEPRECIATION		COST		Rate	DEPRECIATION			W.D.V. As At June 30, 2023
	As at July 01, 2023	Additions		(Deletions)	As at June 30, 2024	Adjustment for disposal	For the year		As at July 01, 2023	Adjustment for disposal		
Land- freehold	7,099,170	-	-	7,099,170	-	-	-	-	-	-	-	7,099,170
Building on freehold land	96,892,849	-	-	96,892,849	10%	6,063,483	36,258,021	-	42,321,504	6,063,483	-	54,571,345
Furniture and fixture	1,258,163	153,900	-	1,412,063	10%	64,460	640,991	-	705,451	64,460	-	706,612
BNM hospital furniture	4,553,338	955,000	-	5,508,338	10%	305,099	2,185,557	-	2,490,656	305,099	-	3,017,682
Vehicles	8,351,618	62,000	-	8,413,618	10%	564,033	2,736,934	-	3,300,967	564,033	-	5,112,651
Office & electric equipment	15,632,886	520,100	(101,000)	16,051,986	10%	(4,641)	3,206,326	(4,641)	4,466,260	1,264,575	-	11,585,726
Medical equipment	75,345,927	4,929,282	-	80,275,209	10%	-	25,149,051	-	30,395,160	5,246,109	-	49,880,049
Computers	1,171,498	152,800	-	1,324,298	20%	-	727,686	-	836,365	108,679	-	487,933
TOTAL 30-06-2024	210,305,449	6,773,082	(101,000)	216,977,531		(4,641)	70,904,566	(4,641)	84,516,363	13,616,438		132,461,168

4.1 PROPERTY PLANT AND EQUIPMENT - UNRESTRICTED - Comparative

PARTICULARS	2023					2022					W.D.V. As At June 30, 2023	
	COST		Rate	DEPRECIATION		COST		Rate	DEPRECIATION			W.D.V. As At June 30, 2023
	As at July 01, 2022	Additions		(Deletions)	As at June 30, 2023	Adjustment for disposal	For the year		As at July 01, 2022	Adjustment for disposal		
Land- freehold	7,099,170	-	-	7,099,170	-	-	-	-	-	-	-	7,099,170
Building on freehold land	96,892,849	-	-	96,892,849	10%	6,737,203	29,520,818	-	36,258,021	6,737,203	-	60,634,828
Furniture and fixture	1,144,263	113,900	-	1,258,163	10%	65,404	575,587	-	640,991	65,404	-	617,172
BNM hospital furniture	4,191,338	362,000	-	4,553,338	10%	222,865	1,962,692	-	2,185,557	222,865	-	2,367,781
Vehicles	4,976,618	4,425,000	(1,050,000)	8,351,618	10%	(96,250)	2,456,830	(96,250)	2,736,934	376,354	-	5,614,684
Office & electric equipment	6,392,893	9,239,993	-	15,632,886	10%	803,931	2,402,395	-	3,206,326	803,931	-	12,426,560
Medical equipment	58,085,749	17,260,178	-	75,345,927	10%	4,689,182	20,459,869	-	25,149,051	4,689,182	-	50,196,876
Computers	1,064,998	106,500	-	1,171,498	20%	-	634,369	-	727,686	93,317	-	443,812
TOTAL 30-06-2023	179,847,878	31,507,571	(1,050,000)	210,305,449		(96,250)	58,012,560	(96,250)	70,904,566	12,988,256		139,400,883

5 INTANGIBLE ASSET

PARTICULARS	2024						W.D.V. As At June 30, 2024			
	COST			AMORTIZATION						
	As at July 01, 2023	Additions	(Deletions)	As at June 30, 2024	Rate	As at July 01, 2023		Adjustment for disposal	For the year	As at June 30, 2024
BNMH Software	727,320	-	-	727,320	10%	270,954	-	72,732	343,686	383,634
R & D Software	50,000	-	-	50,000	10%	7,500	-	5,000	12,500	37,500
TOTAL 30-06-2023	777,320	-	-	777,320		278,454	-	77,732	356,186	421,134

5.1 INTANGIBLE ASSET - Comparative

PARTICULARS	2023						W.D.V. As At June 30, 2023			
	COST			DEPRECIATION						
	As at July 01, 2023	Additions	(Deletions)	As at June 30, 2023	Rate	As at July 01, 2022		Adjustment for disposal	For the year	As at June 30, 2023
BNMH Software	727,320	-	-	727,320	10%	198,222	-	72,732	270,954	456,366
R & D Software	50,000	-	-	50,000	10%	2,500	-	5,000	7,500	42,500
TOTAL 30-06-2023	777,320	-	-	777,320		200,722	-	77,732	278,454	498,866

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BIN QUTAB FOUNDATION

	NOTE	2024 RUPEES	2023 RUPEES
6 CAPITAL WORK IN PROGRESS - UNRESTRICTED			
Building on freehold land:			
Opening balance		11,607,571	5,443,086
Addition during the year	6.1	9,261,949	6,164,485
Transferred during the year to fixed assets		-	-
Closing balance		20,869,520	11,607,571
6.1 Capital work in progress - additions			
Addition in cash		9,261,949	6,164,485
Addition in kind		-	-
		9,261,949	6,164,485
7 LONG TERM DEPOSITS			
Security and deposits	7.1	76,600	176,600
		76,600	176,600
7.1 These represent security deposits held with suppliers / vendors.			
8 LOANS AND ADVANCES - UNSECURED			
Advances to staff - considered good	8.1	1,126,977	2,441,492
Advances to suppliers - considered good		3,352,183	-
Other receivable - considered good		199,311	576,635
		4,678,471	3,018,127
8.1 These represent interest free short term temporary advances given to the employees of the Foundation to meet the day to day expenses and against their respective salaries.			
9 ADVANCE INCOME TAX			
Opening balance		332,367	250,189
Tax deducted / paid during the year		2,573,544	74,947
		2,905,911	325,136
Less: provision for the year			
Current		6,941,238	3,433,158
Tax credit u/s 100C		(6,941,238)	(3,433,158)
Prior period	21	-	(7,231)
		-	(7,231)
		2,905,911	332,367

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BIN QUTAB FOUNDATION

10 SHORT TERM INVESTMENTS

Term deposit certificate (TDR)	10.1	20,000,000	-
		<u>20,000,000</u>	<u>-</u>

10.1 These represent certificates of Islamic investment with maturity periods ranging from one to twelve months, carrying profit at variable rates

11 CASH AND BANK BALANCES

Cash in hand		240,478	367,329
Cash at bank - current accounts		4,182,890	2,001,306
Cash at bank - saving accounts	11.1	24,138,002	11,653,272
		<u>28,561,370</u>	<u>14,021,907</u>

11.1 The saving accounts carry profit at the rates ranging between 2.79% to 5.08% (2023: 2.79% to 5.08%) per annum.

12 ACCRUED AND OTHER LIABILITIES

Sundry creditors		5,461,263	3,208,242
Salaries payable		3,295,109	1,603,617
Audit fee payable		157,500	66,413
Withholding tax payable		94,156	85,122
Provident fund payable		108,664	85,696
Staff performance allowance payable		824,658	1,022,727
Utilities payable		4,200	4,200
EOBI payable		97,610	65,500
		<u>10,043,160</u>	<u>6,141,517</u>

13 PROJECT - DIALYSIS CENTER

Opening Balance		-	-
Addition during the year	13.1	89,816,750	-
Used during the year		<u>(87,388,475)</u>	-
Closing Balance		<u>2,428,275</u>	<u>-</u>

13.1 Bin Qutab Foundation entered into an agreement with FC (South) KP to establish the South Medical Center in Kohat. The facility was included a dialysis center with 15 dialysis machines, an OPD section, and a commercial pharmacy. All the investment was made by FC (South) KP, while Bin Qutab Foundation served as a consultant for the establishment and operation of the hospital. The total project cost was Rs.89,816,750/-, utilized till June 30,2024 Rs. 87,388,475/- and remaining balance is Rs.2,428,275.

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BIN QUTAB FOUNDATION

14 SHORT TERM BORROWINGS - Unsecured

Short term borrowings	14.1	<u>1,640,466</u>	<u>2,356,431</u>
		<u>1,640,466</u>	<u>2,356,431</u>

14.1 These represent short term borrowings provided by the members of the Foundation at no markup to meet the cash deficiency on routine basis. These are returned during the year and borrowed again when needed.

15 CONTINGENCIES AND COMMITMENTS

The Foundation has no contingency and / or commitment as at June 30, 2024 (2023: nil).

16 DONATIONS/ RECIEPTS

Donations received during the year - gross		102,510,780	108,809,827
Other receipts	24	115,637,019	66,725,756
Less: Donations received in kind	16.1	<u>(2,250,385)</u>	<u>(8,854,957)</u>
Donations received in cash		<u>215,897,414</u>	<u>166,680,626</u>

16.1 Donations received in kind

Donations received in kind		2,250,385	8,854,957
Less: Transferred to:			
CWIP		-	-
Equipment		(1,353,200)	(3,610,600)
Expenses		(897,185)	(5,244,357)
		<u>(2,250,385)</u>	<u>(8,854,957)</u>
		<u>-</u>	<u>-</u>

17 OTHER RECEIPTS

Profit on Islamic Investmnet		596,701	-
Miscellaneous income		<u>1,073,039</u>	<u>334,526</u>
		<u>1,669,740</u>	<u>334,526</u>

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BIN QUTAB FOUNDATION

18 OPERATING EXPENSES

Salaries and benefits		38,383,145	37,773,918
Travelling and conveyance		135,300	15,120
Repairs and maintenance		3,939,124	6,190,382
Telephone, postage and courier		782,120	905,340
Printing, stationery and periodicals		2,203,006	1,953,239
Utilities		7,060,092	4,707,218
Entertainment expenses		100,250	105,423
Petrol, oil and lubricants		153,428	248,300
Depreciation expense	4	13,616,438	12,988,256
Miscellaneous expenses		1,819,491	1,169,852
Medicine and lab regents		81,491,132	52,837,848
Financial support program	18.1	8,115,679	5,625,467
Marketing expenses		2,681,257	1,582,451
Event expenses		2,556,092	2,182,631
Office rent		1,331,100	619,179
Software amortization expense	5	77,732	77,732
Staff medical assistance		231,486	19,921
Nursing college misc expenses (BNMH)		496,090	1,169,690
Loss on disposal		96,359	3,750
IHITC HR services expenses		-	997,000
		<u><u>165,269,321</u></u>	<u><u>131,172,717</u></u>

18.1 FINANCIAL SUPPORT PROGRAM (FSP)

FSP for needy families		<u>8,115,679</u>	<u>5,625,467</u>
		<u><u>8,115,679</u></u>	<u><u>5,625,467</u></u>

19 ADMINISTRATIVE EXPENSES

Salaries and benefits	19.1	10,876,682	10,704,045
Travelling and conveyance		320,291	1,436,092
Office supply		912,565	524,300
Repairs and maintenance		6,750	3,000
Telephone, postage and courier		443,907	646,779
Legal and professional charges	19.2	1,158,880	1,386,321
Auditors' remuneration	19.3	157,500	66,413
Entertainment expenses		3,424,489	2,840,450
Petrol, oil and lubricants		1,130,782	1,110,860
Advertisement expenses		28,185	28,196
Programming and consulting fee		454,161	433,772
Website maintenance charges		66,124	65,527
		<u><u>18,980,316</u></u>	<u><u>19,245,755</u></u>

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19.1 Salaries and benefits

Salaries and benefits include provident fund expense of Rs. 583,368/- (2023: Rs. 475,888/-). The aggregate amounts charged for Directors, Chief Executive and Executives numbering nil (2023: nil) for the year has been Rs. Nil (2023: Rs. Nil).

19.2 Legal and professional charges

Legal charges and fees	<u>1,158,880</u>	<u>1,386,321</u>
	<u>1,158,880</u>	<u>1,386,321</u>

19.3 Auditors' remuneration

Annual audit fee	150,000	63,250
Sales tax @5%	7,500	3,163
	<u>157,500</u>	<u>66,413</u>

20 FINANCE COST

Bank charges	<u>264,002</u>	<u>255,538</u>
	<u>264,002</u>	<u>255,538</u>

21 OTHER INCOME

Prior year tax adjustment	9	<u>-</u>	<u>7,231</u>
		<u>-</u>	<u>7,231</u>

22 CASH AND CASH EQUIVALENTS

Cash and cash equivalents included in the statement of cash flows comprise of the following statement of financial position amounts:

Cash and bank balances	11	<u>28,561,370</u>	<u>14,021,907</u>
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23 RELATED PARTY TRANSACTIONS

The Foundation has a policy whereby all transactions with related parties are entered into at arm's length prices using comparable uncontrolled price method. Transactions and outstanding balances with related parties during the year are as follows:-

Name and basis of relationship	Nature of transaction		2024	2023
Directors / members	Donations	23.1	<u>233,000</u>	<u>1,632,610</u>
Associated company	Donations	23.2	<u>3,209,646</u>	<u>5,226,691</u>
Members	Short term loan	23.3	<u>1,640,466</u>	<u>2,356,431</u>
Members	Borrowings - net	23.3	<u>(715,965)</u>	<u>1,206,431</u>

23.1 Directors / members are related parties on the basis of being members of the Foundation.

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BIN QUTAB FOUNDATION

23.2 Bin Qutab International is the associated company of the Foundation on the basis of common directorship.

23.3 Short term borrowings are provided by the members of the Foundation at NIL markup.

24 SEGMENT REPORTING

The segment analysis with respect to its income and expenses is as follows:

24.1 Begum Noor Memorial Hospital (BNMH)

Donations / Receipts

Patient OPD receipts	7,394,050	6,024,850
Lab charges received	6,801,392	4,754,850
ECG & USG charges received	2,587,750	1,226,280
Pharmacy charges received	17,192,077	13,981,730
Procedure fee received	6,236,186	862,000
X-ray fee received	3,046,050	1,902,100
Dialysis charges received	23,702,400	13,240,210
Ambulance charges received	991,900	423,500
Miscellaneous income	2,187,281	1,230,890
Consultancy Fee	15,000,000	-
Sehat insaf card income (SLI)	29,392,933	22,462,346
Nursing college income (BNMH)	1,105,000	617,000
	115,637,019	66,725,756

Expenses

Salaries and benefits	38,383,145	37,773,918
Travelling and conveyance	135,300	15,120
Repairs and maintenance	3,939,124	6,190,382
Telephone, postage and courier	782,120	905,340
Printing, stationery and periodicals	2,203,006	1,953,239
Medicine and lab regents	81,491,132	52,837,848
Utilities	7,060,092	4,707,218
Entertainment expenses	100,250	105,423
Petrol, oil and lubricants	153,428	248,300
Miscellaneous expenses	1,819,491	1,169,852
Marketing expenses	2,681,257	1,582,451
Event expenses	2,556,092	2,182,631
Financial support program	8,115,679	5,625,467
Rent expenses	1,331,100	619,179
Staff medical assistance	231,486	19,921
Nursing college misc expenses (BNMH)	496,090	1,169,690
	151,478,792	117,105,979

Net surplus / (deficit)

(35,841,773)

(50,380,223)

BIN QUTAB FOUNDATION

24.2 Isolation Hospital & Infections Treatment Centre (IHITC)

Donations / Receipts

NDMA for July 2020 to December 2020
 NDMA for January 2021 to June 2021
 NDMA for July 2021 to December 2021

-	-
-	-
-	-

Expenses

Disbursement - expenses July 2020 to December 2020
 Disbursement - expenses January 2021 to June 2021
 Disbursement - expenses July 2021 to December 2021

-	-
-	-
-	997,000
-	997,000

Surplus / (deficit)

Other allowances and expenses

Total Other Receipt

-	(997,000)
-	-
-	(997,000)

25 PROVIDENT FUND

25.1 The Foundation has maintained an Employees Provident Fund Trust and investments out of the Fund are made in accordance with the provisions of section 227 of the Companies Act, 2017 and the rules formulated for this purpose. The information of the Fund is as follows:

		2024	2023
		(Audited)	(Audited)
Size of the fund		3,313,986	1,875,911
Cost of investment made	25.2	2,500,000	1,500,000
Percentage of investment made		75%	80%
Fair value of investment		2,500,000	1,500,000

25.2 Breakup of cost of investment

Saving bank account

<u>3,205,318</u>	<u>1,790,207</u>
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25.3 The above information is based on the audited financial statements of the Provident Fund 2024.

26 NUMBER OF EMPLOYEES

Number of employees at the end of the year
 Average number of employees during the year

<u>77</u>	<u>77</u>
<u>77</u>	<u>76</u>

27 CORRESPONDING FIGURES

Corresponding figures are re-arranged and / or re-classified, wherever necessary, for the purpose of better comparison. However, no material re-arrangement / re-classification has been done in these financial statements.

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28 DATE OF AUTHORIZATION FOR ISSUE

The financial statements were authorized for issue by the Board on December 19, 2024.

29 GENERAL

Figures have been rounded off to the nearest rupee.

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Chief Financial Officer



Chief Executive Officer



Chairman