ANDHRA PRADeSH
LEGISLATIVE ASSEMBLY DEBATES
OFFICIAL REPORT

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Appendix 104-161
ANDHRA PRADESH LEGISLATIVE ASSEMBLY

Monday, the 14th March 1966.

The House met at Half-Past Eight of the Clock.

[MR. DEPUTY SPEAKER IN THE CHAIR]

ORAL ANSWERS TO QUESTIONS

AMENDMENT PROPOSED TO THE CENTRAL SALES TAX ACT.

8 2 2

1487 Q.—Sarvasti A. Sarveswara Rao and V. Satyanarayana (Put by Sri P. Subbaya (Yerragondipalem)):—Will the hon. Minister for Revenue be pleased to state:

(a) whether the Union Government asked the State to give its suggestions regarding the amendments proposed by it to the Central Sales Tax Act of 1956; and

(b) whether any suggestions were made by the State Government?

The Minister for Revenue (Sri N. Ramachandra Reddy):

(a) Yes, sir.

(b) A Statement showing the proposals received from the Government of India during the years 1964 and 1965 to amend the Central Sales Tax Act, 1956 and the suggestions made by the State Government thereon is placed on the Table of the House.

101/1—1
STATEMENT PLACED ON THE TABLE OF THE HOUSE.

Statement showing the Proposals received from the Government of India during the years 1964 and 1965 to amend the C.S.T. Act, 1956 and the suggestions made by the State Government -Vide Legislative Assembly Question No. 822 (*1487)

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Proposal of the Government of India</th>
<th>Suggestions made by the State Government</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>With a view to have an effective check and to prevent bogus transfers of goods to agents or branches in other States, mainly with a view to avoid Central Sales Tax, the Govt., of India have proposed to amend sections 6, 10 and 13 of the Central Sales Tax Act, 1956, so as to regulate the transfer of goods to the branches or agents of one state to other state by insisting upon them to produce permits or certificates as proposed to be prescribed under the Act.</td>
<td>The State Government agreed with the proposal of the Government of India.</td>
<td>The State Government agreed with the proposal of the Government of India.</td>
</tr>
<tr>
<td>2.</td>
<td>The Government of India have proposed to amend the proviso to section 9(1) of the Central Sales Tax Act, 1956 so as to provide that in case where no form prescribed for the purposes of Section 8(4)(a) is utilised at the time of purchase of goods, the tax in respect of the sale not exempt under Section 6(2) of the Act, would be collected in the State where the dealer effecting the subsequent sale is registered.</td>
<td>The State Government supported the proposal of the Government of India.</td>
<td>The State Government supported the proposal of the Government of India.</td>
</tr>
<tr>
<td>3.</td>
<td>According to the provisions of Sections 178 and 179. of the Income Tax Act, 1961, it is obligatory on the Official Liquidator to give intimation to the Income Tax Officer about his appointment and to set aside an amount which would be sufficient for any income-tax which is then or likely thereafter to become payable by the Company. The Government of India have proposed to incorporate a provision on the above lines in the Central Sales Tax Act, 1956.</td>
<td>The State Government agreed with the proposal of the Government of India.</td>
<td>The State Government supported the proposal of the Government of India and also recommended that in cases where the funds at the disposal of the liquidator are not sufficient to make full provision for both income-tax and sales tax liabilities, they may be distributed on a pro rata basis in satisfaction of the respective liabilities.</td>
</tr>
</tbody>
</table>
Oral Answers to Questions.  
14th March 1966.  

Sri N. Ramachandra Reddy:—No, Sir, as the proposed arrangement is neither convenient to the public nor economical.

Sri N. Ramachandra Reddy—That is a different matter; the main question is different; of course the irregularities and the difficulties the public are facing are there. That is a different matter and it will be looked into.

Sri N. Ramachandra Reddy.—The only alternative is to rectify the existing defects; sometime back, it was brought to my notice, of course only some places were referred to, not all the places, and so instructions have been issued to rectify the defects.

Sri Vavilala Gopalakrishnaiah.—What are the instructions given?

(No answer).
Sri N. Ramachandra Reddy.—I will take the suggestion and get it examined.

Sri N. Ramachandra Reddy.—Hon. Member may kindly mention at what places this difficulty is experienced. Then certainly the matter will be looked into.
SRI LANKA JUTES DISPOSAL TAX ON BAMBOOS.

SINGLE POINT SALES TAX ON BAMBOOS.

824—

Q.—Sarvasri A. Sarveswara Rao and V. Satyanarayana (Put by Sri P. Subbaya):—Will the hon. Minister for Revenue be pleased to state:

(a) whether the Government have received a memorandum from Andhra Pradesh Bamboo Consumer's Association, Vijayawada in June 1965 with a request that 3% single point sales tax be levied on bamboos instead of 2% multipoint tax which is the present practice; and

(b) if so, the action taken thereon?

Sri N. Ramachandra Reddy:—(a) Yes, Sir.

(b) The request of the Association was examined and rejected by the Government.

Sri N. Ramachandra Reddy:—Uniformity has to be brought about or an amendment of the Act has to be brought about; That will be considered.

Sri N. Ramachandra Reddy:—Personally I am also in a way convinced; but it will have to be considered again and necessary steps will have to be taken; I will consider the matter,
AYACUT UNDER PALTERU AND PENTA OPEN HEAD CHANNELS.

825—

1775 Q.—Sri P. Gunnayya (Put by Sri Vavilala Gopalakrishnaiah):—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) the extent of ayacut under the Palteru and Penta open head channels for the Vegavati river flowing in Bobbili taluk, Srikakulam district;

(b) whether any annual repairs have been taken up during 1965-66, and

(c) if so, the amount of expenditure incurred for each of the said channels?

[The Minister for Education deputised the Minister for Irrigation and Power and answered the questions.]

The Minister for Education (Sri A. Balarami Reddy):—(a) 6,000 and 4,000 acres respectively.

(b) Yes, Sir.

(c) Rs. 5,686 on Palteru Channel and Rs. 2,596 on Penta channel.

PALERU-BITRAGUNTA SUPPLY CHANNEL.

826—

1543 Q.—Sri S. Vemayya (Buchireddypalem):—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether it is a fact that the Paleru-Bitragunta Supply Channel has silted up for a distance of 3 miles in Kandukur taluk of Nellore district: and

(b) if so, the action taken thereon?

Sri A. Balarami Reddy:—(a) Yes, Sir.

(b) Estimate for silt clearance work was sanctioned and the work completed.

**ANICUT FOR MAHENDRATANAYA RIVER.**

827—

*1799 Q.—Sri P. Gunnayya (Kothur):—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether the Government have investigated the water Diversion Scheme or the Ancut Scheme or lift Irrigation Scheme for the river Mahendratanaya, in Pathapatnam taluk, Srikakulam district;

(b) if so, the estimated expenditure therefor; and

(c) the extent of ayacut that will be brought under paddy cultivation?

Sri A. Balarami Reddy:—(a) Yes, Sir.

(b) and (c) Do not arise as the scheme is not feasible.

**RADHASAGARAM GEDDA DAM.**

828—

*1808 Q.—Sri P. Gunnayya:—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether the Government have investigated the Radhasagaram Gedda Dam of Chinnahamsa village, Pathapatham taluk;

(b) if so, the estimated amount of expenditure for the same; and

(c) the extent of land that will come into paddy cultivation under it?
829—

*1709 Q.—Sri Ch. Appala Naidu (Povvada):—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) the year in which the anicut on Meghadrigedda of Ammachervu in Pedagadi village, Visakhapatnam taluk and district has been washed away;

(b) whether the Government have taken any steps to construct the same; and

(c) if so, the estimated amount and when the said work will be completed?

Sri A. Balarami Reddy:—(a) The anicut over Meghadrigedda of Ammachervu was not actually washed away, but during heavy floods of 10/1958 the right side channel bank had been breached. Again in October 1962, the right margin of the stream had badly scoured and damage was caused to the rough stone groyne already formed.

(b) Yes, Sir.

(c) An amount of Rs. 24,200 was spent and the gap in the breach portion caused in 10/1958 was closed in 1961. An estimate for Rs. 1,73,200 for works or Rs. 1,96,900 including direct and indirect charges has been prepared for constructing the weir and masonry body wall and it is under consideration of Chief Engineer (M.I.), the work will be completed after the estimate is sanctioned.
Oral Answers to Questions.

14th March 1966. 9

**BRIDGE ON CHAMPAVATHI RIVER AT PEDAKADA.**

830—

*110 (6249) Q.—Sri T. Sanyasi Naidu [Put by Sri B. Srirama Murthy (Vijayanagaram)]:—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether estimates were prepared to construct a bridge on the Champavathi River at Pedakada, Visakhapatnam district;

(b) if so, the estimated amount; and

(c) when that work will be taken up?

Sri A. Balarami Reddy:—(a) No, Sir.

(b) and (c) Do not arise.

Sri T. Sanyasi Naidu:—Whether the estimate was prepared to construct a bridge on the river? The estimate was prepared and the bridge is being constructed. The amount is Rs. 9,87,170.

Sri B. Srirama Murthy:—Latest estimate of the cost is Rs. 5,710. How much has been spent on the bridge construction so far?
Oral Answers to Questions.

Sri B. Sreerammurthy:—I am told it was sanctioned. If there is any such information could the hon. Minister give it to us?

Sri A. Balarami Reddy:—It is under examination by the Government.

Q. 1237—Sri M. Ram Reddy (Mahboobnagar):—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether any estimate has been prepared for the construction of an anicut across the Nizalapur vagu in Mahabubnagar taluk;

(b) what is the estimated amount.

(c) whether it is a fact that the said anicut will be able to feed not only Nizalapur tanks but also two tanks of Kandoor village in Wanaparthy taluk which will irrigate about 1,000 acres; and

(d) when the Government propose to take up the work?

Sri A. Balarami Reddy:—(a) Not yet; detailed surveys are in progress.

(b) This will be known only after the estimate is prepared.

(c) The possibilities are being examined by Chief Engineer. As the investigation is still in progress, it is not possible to say at this stage, as to what acreage could be increased under the tanks of Kandoor village.

(d) After surveys are completed and the estimate is prepared and sanctioned.

Sri M. Ram Reddy:—Is it a fact that the Collector has recommended for the construction of this anicut?

Sri A. Balarami Reddy:—There was an original anicut across feeding the tanks of Nizalpur village.
Oral Answers to Questions

1807 Q.—Sri P. Gannayya:—Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether the Lodhalodhi Reservoir Scheme in Jalantia area, Sompeta taluk, Srikakulam district which can irrigate two thousand acres of land has been investigated;

(b) if so, the estimated expenditure for the same; and

(c) when it will be completed?

Sri A. Balarami Reddy:—(a) Yes, Sir, the scheme can irrigate only 390 acres.

(b) Rs. 3.67 lakhs.

(c) The work has been taken up and is expected to be completed by December 1966.

Misappropriation of Panchayat Funds.

833—

*27 (4478) Q.—Sri C. Vittal Reddy (Narsapur):—Will the hon. Minister for Panchayat Raj be pleased to state:

(a) whether it is a fact that Sri Vittal Reddy, M.L.A., has sent a report to the hon. Minister, that the village Sarpanchas of (1) Sadullanagar, (2) Daibatabad and (3) Rayalapuram, etc. in Narsapuram taluk, Medak district are misappropriating the funds of the Panchayat;

(b) whether it is a fact that after the report (in writing) the District Panchayat Officer has inspected the Panchayat records of Sadullanagar on 31st December 1964 if so, what are the irregularities noticed and action taken thereon; and

(c) when the records of the other village Panchayats referred to by the M.L.A. will be inspected and action will be taken?

The Minister for Panchayati Raj (Dr. M. N. Lakshminarasayya):—(a) Yes, Sir,
(b) The District Panchayat Officer inspected this Panchayat on 31st December 1964. A list of irregularities noticed by the District Panchayat Officer is placed on the Table of the House.

The District Panchayat Officer has already taken action to prohibit the Sarpanch from drawing the funds of the Panchayat.

(c) The records of other Gram Panchayats have also been inspected both by the Divisional Panchayat Officer and District Inspector of Local Fund Accounts, and action is being taken under rules.

STATEMENT PLACED ON THE TABLE OF THE HOUSE.

Vide answer to Item (b) of the Legislative Assembly Question No. 833 [G.27 (4473)].

LIST OF IRREGULARITIES COMMITTED BY THE SARPANCHEE,

SADULLANAGAR GRAM PANCHAYAT.

1) The Sarpanch had drawn a total sum of Rs. 2,200 as advance for construction of culvert. The work was in progress by the time the District Panchayat Officer visited the Gram Panchayat and the approximate cost of the work completed by that time was about Rs. 300. Thus the Sarpanch had drawn amounts in excess of the actual requirements.

2) The Sarpanch spent a total sum of Rs. 575 for the repairs to a well in Harijanwada in Sadullanagar. The work was actually executed, but neither the estimates nor the check measurement certificates were produced by the Sarpanch to find out the actual cost of the work executed.

3) The Sarpanch had drawn Rs. 100 on 25th October 1960 and another sum of Rs. 100 on 28th December 1960 towards advance payment for the construction of one elementary school building at Sadullanagar. Out of these amounts Rs. 100 has been recovered and remitted into the Treasury. The balance amount of Rs. 100 is still recoverable.

4) The Sarpanch has drawn Rs. 147 for the construction of another culvert at Sadullanagar. The work was executed with people's participation. But there is no estimate nor check measurement certificate for the work done.

5) He retained a cash balance of Rs. 181.79 P. on 31st December 1964 which was in excess of the limit prescribed by the Collector.

6) He has incurred some irregular expenditure without obtaining the orders from the competent authority.

Sri Ramachandra Rao Deshpande (Nayankhed):—I would like to know whether the cases have been referred to Police for prosecution. Of course, the procedure is there. It requires a lot of procedure. At least has the machinery come into motion to see that he is prosecuted.
Dr. M. N. Lakshminarasaiah:—The only thing here is the recovery proceedings under Telengana .......... ...

Dr. M. N. Lakshminarasaiah:—I will give instructions to Collector to take immediate action.

Dr. M. N. Lakshminarasaiah:—I do not know, Sir. But anyway, he is prohibited now from operating the funds and the proceedings for recovery.......... ...

Dr. M. N. Lakshminarasaiah:—Collector take immediate action.

(ప. 5. సంప్రదాయానికే యొక్క సాధనం తెలియదు)

(ప. 6. మాత్రమే నాటి వ్యవస్థ యొక్క సంసారం తెలియదని తెలియదు)

చిత్రం 20. సాధనానికి వివరణ —తిరందు అవిష్కరణ వివరణ.

(ప. 7. మాత్రమే ప్రత్యేక శాస్త్ర తయారీ చేసే నందితెల్లు తెలుసారు.)

(ప. 8. మిశ్రమ వివిధ పదార్థాల గాని గోపని ఉండే పదార్థాల గాని తయారు చేసేదిని చేసేదిని తెలియదు. మాత్రమే నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు)

(ప. 9. మిశ్రమ అనేది యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 10. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 11. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 12. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 13. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 14. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)

(ప. 15. మిశ్రమ అనేది నాసక సమూత్ర యొక్క సంసారం తెలియదని తెలియదు.)
MISAPPROPRIATION OF FUNDS OF GALIVEEDU PANCHAYAT.

834—

1982 Q.—Sri G. Viswanatha Reddy (Reddipalli):—Will the hon. Minister for Panchayat Raj be pleased to state:

(a) whether it is a fact that the Panchayat President, Galiveedu, Rayachoty taluk, Cuddapah district, has misappropriated a sum of Rs. 5,650 on 26th September 1965;

(b) whether the District Collector, Cuddapah, has recommended for the removal and prosecution of the President; and

(c) if so, the action taken by Government in the matter?

Dr. M. N. Lakshminarasayya:—(a) It was reported to Government that the Sarpanch has committed some serious irregularities in the administration of the Gram Panchayat.

(b) The District Collector, Cuddapah has submitted proposals for the removal of the Sarpanch.

(c) Under section (3) of section 50 of the Andhra Pradesh Gram Panchayats Act, 1964, the Sarpanch has been directed through notice, dated 27th January 1966 to explain why he should not be removed from the Office of the Sarpanch.

MISAPPROPRIATION OF PANCHAYAT FUNDS.

835—

*20 (4112) Q.—Sri K. Raghavulu (Put by Sri S. Vemayya):—Will the hon. Minister, Panchayat Raj, be pleased to state:

(a) whether it is a fact that Sri Posu Anandam, ex-Sarpanch, Pedda Pendyala Village Panchayat Board, Ghanapur Block, Warangal district, has misappropriated a sum of Rs. 8,000 from the funds of the said Panchayat during 1963-64;

(b) whether it is a fact that since two years neither the Panchayat Inspectors (Extension Officers) nor the Divisional Panchayat Officer have verified the records and they have not also given any instructions to the Members of Sarpanch regarding the Developmental activities; and

(c) if so, the action taken thereon?

Dr. M. N. Lakshminarasayya:—(a) The Collector, Warangal has reported that Sri P. Anandam, the ex-Sarpanch, Pedda Pendyala Gram Panchayat, is found to have misappropriated the Panchayat funds to the tune of Rs. 4,238-68 P. during the financial year 1963-64 and booked false expenditure in the Gram Panchayat Accounts;

(b) No, Sir.
The Inspecting Officers, viz., Extension Officer (Panchayats), Divisional Panchayat Officer, and District Panchayat Officer inspected this Panchayat on 6th July 1962; 12th December 1962 and 25th November 1963 respectively and pointed out the irregularities noticed by them in the inspection notes.

(c) Does not arise.

Sri P. Rajagopal Naidu:—(Interruption)...

Dr. M. N. Lakshminarasaiah:—They asked about the action taken thereon. There is the supplementary to which I am coming Sir. I must be allowed to say. They have investigated. That is why...

Sri P. Subbaiah:—The hon. Minister told us that action has been taken.
14th March 1966.

Oral Answers to Questions.

There are very serious criminal ingredients in this case of the Sarpanch. The District Collector addressed the Superintendent of Police, Warangal, to conduct a detailed investigation in the matter and to book the culprits for further criminal action. The case is now under investigation by the Police Sir. These are all non-official people. There are so many things......

Sir, there are no criminal ingredients?—So Many things

Sir, there are no criminal ingredients?—So Many things

They are not available some times. But anyway I will see now that these cases are expedited.

Accounts thorough audit surcharge proceedings.
Oral Answers to Questions.  14th March 1966.  19

The Chief Minister (Sri K. Brahmananda Reddy):—After the Collector's letter, there seems to be inordinate delay by the Police. Again the Secretariat will certainly write to the Collector asking him to expedite the matter, complete the investigation and if there is a case file the charge-sheet.

Sri T. K. R. Sarma:—Has the Government obtained the explanation from the Collector or the Police in this regard? Have they at least made any attempt to that effect?

Dr. M. N. Lakshminarsah:—Our Chief Minister also has said that the Collector is being requested to expedite it.

The Collector:—I regret the explanation interfering delay, hence, thanks.

SCARCITY OF DRINKING WATER.
Dr. M. N. Lakshminarayya:—(a) No complaint or representation was received by Government from the people or Panchayat regarding the inconvenience suffered for want of drinking water during April 1965, by the public of Vatamchedu, Karjathakudi and Pammalmitthu villages of Sullurpet taluk, Nellore district. The supply of drinking water from drinking water ponds was inadequate due to adverse seasonal conditions during April 1965.

(b) Drinking water in the villages Vatamchedu, Karjathakudi and Pammalmitthu of Sullurpet taluk, Nellore district, are not adequate due to their vicinity to the sea and the salinity of the water. However, improvements to the existing wells and drinking water ponds were taken up in the previous years at Vatamchedu and Pammalmitthu villages and works have been completed. In respect of Kadiri and Kadiritippa, Kandrika villages' works have been sanctioned and they are being executed.

(a) Temporary measure by ponding the water. Permanent ponds have been deepened and water storage increased by 50%. Salinity of water related to sea water has been reduced.

NAGAR KURNOOL-KOLLA PUR ROAD.

(a) whether it is a fact that the construction work of Nagarkurnool-Kollapur road and Bijnepalli-Budkur road in Mahabubnagar district has been taken up 7 years ago;
(b) the stage at which the construction of the said two roads stand at present;
(c) the amount of expenditure incurred so far on the said two roads; and
(d) the reason why the construction of the same has not been completed so far?
The Minister for Public Works (Sri T. V. Raghavulu):—(a) Yes, Sir.

(b) Nagarkurnool-Kollapur road.—Formation of road, 52 culverts and out of 26 C.D. Works, 20 have been completed and the work on the remaining six is in progress which will be completed during this year. In respect of metalling the road, materials have been collected on the site and only spreading work is to be done.

Bijnepally-Buthpur road.—The road is completed except major masonry works and approaches thereto.

(c) Rs. 16,58,537;

(d) The required steel, cement and pipes could not be procured in time due to scarcity. Further, in the monsoons the dolcis could not move on the left-over gaps with vagus (rivers).

Sri M. Ram Reddy:—Will the hon. Minister for Public Works be pleased to state:

(a) how many culverts and bridges are under construction on the National Highway from Jedcherla to Pebbar in Mahbubnagar district;

(b) since how many years the construction is going on; what is the reason for such delay; and

(c) when it is likely to be opened for main traffic?

Sri T. V. Raghavulu:—(a) Fifteen.

(b) A statement showing the reasons for delay against each item of work is appended.

(c) End of August 1966.

CULVERTS ON THE JADCHERLA-PEBBAIR ROAD.

838—

*1228 Q.—Sri M. Ram Reddy:—Will the hon. Minister for Public Works be pleased to state:

(a) how many culverts and bridges are under construction on the National Highway from Jedcherla to Pebbar in Mahbubnagar district;

(b) since how many years the construction is going on; what is the reason for such delay; and

(c) when it is likely to be opened for main traffic?
Statement showing the reasons for the delay in the completion of culverts and bridges on the National Highways No. 7 from Jadcherla to Pebbair.

<table>
<thead>
<tr>
<th>Name of the culvert or bridge at Mile on N.H. 7.</th>
<th>Estimate Amount</th>
<th>Date of commencement</th>
<th>Probable date of completion</th>
<th>Reasons for delay</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 58/6</td>
<td>4,14,400</td>
<td>30-10-63</td>
<td>31-7-66</td>
<td>(1) 58/6:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(i) The progress was hampered due to heavy unprecedented floods in September 1964 &amp; rains in 8/65 and 9/65.</td>
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<td>(ii) Rock was met within the wells which was not anticipated in the original Estimate.</td>
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<td>(iii) The value of work is increased from Rs. 4,14,400 to Rs. 5,87,700.</td>
</tr>
<tr>
<td>2 &amp; 3. 59/0 &amp; 60/6</td>
<td>39,900</td>
<td>10-8-62</td>
<td>Do.</td>
<td>(2 &amp; 3) 59/0, 60/6: The culvert at M. 59/0 was completed, but the contractor bucked out to execute the bridge at 60/6. Hence his contract was terminated. The estimate has been modified and the work of 60/6 was entrusted to a local contractor.</td>
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<td>(i) The progress was hampered due to heavy and unprecedented floods in September, 1964 and rains in 8/65 and 9/65.</td>
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<td>(ii) Rock was met within the wells which was not anticipated and provided in the original Estimate.</td>
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<td>(iii) The value of work is increased from Rs. 3,30,000 to Rs. 4,14,400.</td>
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<tr>
<td>4. 62/4</td>
<td>3,30,000</td>
<td>18-10-63</td>
<td>Do.</td>
<td>(4) 62/4:</td>
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<td>(i) The progress was hampered due to heavy and unprecedented floods in September, 1964 and rains in 8/65 and 9/65.</td>
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<td>(ii) Rock was met within the wells which was not anticipated and provided in the original Estimate.</td>
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<td>(iii) The value of work is increased from Rs. 3,30,000 to Rs. 4,14,400.</td>
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<td>5.</td>
<td>65/0</td>
<td>57,400</td>
<td>1-12-63</td>
<td>31-12-65</td>
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<tr>
<td>6.</td>
<td>69/2</td>
<td>4,44,000</td>
<td>15-4-64</td>
<td>31-8-66</td>
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<tr>
<td>7.</td>
<td>69/7</td>
<td>96,100</td>
<td>Do.</td>
<td>31-3-66</td>
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<tr>
<td>8.</td>
<td>76/8</td>
<td>3,59,000</td>
<td>Do.</td>
<td>Do.</td>
</tr>
<tr>
<td>9.</td>
<td>80/7</td>
<td>7,33,200</td>
<td>Do.</td>
<td>31-8-66</td>
</tr>
<tr>
<td>10.</td>
<td>73/8</td>
<td>32,000</td>
<td>19-1-61</td>
<td>30-6-66</td>
</tr>
<tr>
<td>11.</td>
<td>85/2</td>
<td>1,36,700</td>
<td>21-4-63</td>
<td>31-8-66</td>
</tr>
<tr>
<td>12.</td>
<td>85/7</td>
<td>1,26,300</td>
<td>1-1-64</td>
<td>31-8-66</td>
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<tr>
<td>13 &amp; 14.</td>
<td>88/4</td>
<td>88,700</td>
<td>—</td>
<td>—</td>
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<tr>
<td></td>
<td>88/8</td>
<td>88,700</td>
<td>—</td>
<td>—</td>
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<tr>
<td>15.</td>
<td>80/5</td>
<td>80,250</td>
<td>1-9-65</td>
<td>31-3-66</td>
</tr>
</tbody>
</table>
(5) 65/0: Main bridge work has been completed except wearing coat and hand rails.

(6 to 9) 59/2, 69/7, 76/8 and 80/7:
The progress was hampered due to heavy and unprecedented floods of September, 1964. The depth, width and length of the bridges are increased. Rock was met within the wells which was not anticipated and provided in the original Estimate. The cost of Estimate has been increased to Rs. 49,03,500 against the original Estimate for Rs. 16,32,500.

(10) 73/8: The contract of the original contractor was terminated as he failed to complete the work. The balance work is being entrusted on nomination and will be completed by 30th June 1965.

(11) 85/2: The contract of the original contractor was terminated as he failed to complete the work. The balance work has been given on nomination and will be completed by 31st December 1966.

(12) 85/7: The progress was hampered due to heavy and unprecedented floods of September, 1964 and rains of 8/65 and 9/65. This work will be completed by 31st March 1966.

(13&14) 88/4 & 88/5: Tenders are pending approval of Government of India. Works will be started as soon as tenders are approved.

Bridge at 80/5: Main Bridge has been completed. Approaches will be taken up and completed by 31st March 1966.
Oral Answers to Questions.  14th March 1966  25

Sri M. Ramareddy:— Whether the State Government is responsible for this delay or the Central Government?

Sri M. V. R. S. S. Reddy:— Central Government had, hence unavoidable delay. Table 3 shows the details.

Sri M. V. R. S. S. Reddy:— The State has, the Central has, the area happens to be the arterial road and accidents happen there, hence the unavoidable delay.

M. C. Reddy:— August 1954 issue, available only that.

M. R. Reddy:— Culverts already started. Culverts start, accident starts. Is the start of the works safe? Can it be implemented immediately? Is it feasible to implement immediately?

M. R. Reddy:— No need to hurry, avoid accidents.

M. R. Reddy:— No accidents on this road—

On the formation of Andhra Pradesh State on 1st November 1956, sanction of the Government of India was obtained for all the works by submitting detailed estimates and plans.

M. R. Reddy:— Road accidents. The area is arterial road and accidents happen here. Is it advisable to implement immediately? Can it be implemented immediately?

M. R. Reddy:— In the area of 20. The area is arterial, the accidents happen, hence it should be implemented immediately.

M. R. Reddy:— I do not pretend to know.

101/1—4
ROAD FROM K. SAMUDRAM TO THORRUR.

839.—

Q.—Sri P. Rajagopal Naidu.—Will the hon. Minister for Public Works be pleased to state:

(a) whether the road from K. Samudram to Thorrur via Nellikadur, Mahboobabad taluk, Warangal district, is a Highways road; and

(b) if so, whether any grant for its repair was given since 1960-61?

Sri T. V. Raghavulu.—(a) Yes, Sir.

(b) Yes, Sir.

<table>
<thead>
<tr>
<th>Year</th>
<th>Grant Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1960-61</td>
<td>9,881</td>
</tr>
<tr>
<td>61-62</td>
<td>5,783</td>
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<tr>
<td>62-63</td>
<td>6,308</td>
</tr>
<tr>
<td>63-64</td>
<td>6,580</td>
</tr>
<tr>
<td>64-65</td>
<td>6,394</td>
</tr>
</tbody>
</table>

...
Oral Answers to Questions. 14th March 1966. 27

EMPLOYMENT TO PHYSICALLY HANDICAPPED PERSONS.

840—

*1338 Q.—Sarvasri P. O. Satyanarayana Raju (Kosigi) and P. Rajagopal Naidu:—Will the hon. Minister for Labour and Transport be pleased to state:

(a) the number of physically handicapped persons that were given employment by our Government during 1964-65 from the Special Employment Exchange, Hyderabad.

(b) the number of such people given employment in Kurnool district during 1964; and

(c) the special facilities, if any, proposed for the physically handicapped employees?

The Minister for Labour and Transport (Sri B. V. Gurumurthy):—(a) 101 physically handicapped persons were provided with employment during 1964-65 through the Special Employment Exchange for the physically Handicapped, Hyderabad.

(b) Six.

(c) There are no special facilities for physically handicapped employees but the Central and State Governments have granted certain facilities to the physically handicapped persons for their speedy absorption in various departments. A statement containing the details of the above concessions is placed on the Table of the House.

STATEMENT PLACED ON THE TABLE OF THE HOUSE CONTAINING DETAILS OF THE CONCESSION GRANTED BY CENTRAL AND STATE GOVERNMENT TO PHYSICALLY HANDICAPPED PERSONS FOR THEIR SPEEDY ABSORPTION IN VARIOUS DEPARTMENTS—

Vide answer to Legislative Assembly Question No. 840 (*1338).

Central Government:

(1) Physically handicapped persons are not subjected to usual medical examination on first entry into Government service and the question of their employment would be based on the report of the Medical Board attached to the Special Employment Exchange;
(2) In the case of Class III or I posts of artisan class or those involving manual or skilled labour or routine type of work, deaf muteness or deafness by itself is not regarded as disqualification provided physically handicapped are otherwise fit and qualified to hold such posts.

(3) Physically handicapped persons who are otherwise qualified to hold clerical posts and who are certified as being unable to type, by the Medical Board attached to the Special Employment Exchange for handicapped, are exempted from the typing qualifications;

(4) Physically handicapped persons who are considered suitable for appointment in Class III categories may be appointed directly by General Managers of All-Indian Railways without any agency of the Railway Service Commission;

(5) Indian Railways granted certain concession in railway fare to physically handicapped persons and their attendants undertaking journeys to join hospitals for treatment and on discharge from hospital to Training Institution;

(6) Braille literature is carried free for the benefit of blind persons from Central Braille Press/Library, Dehra Dun to and from by the Post and Telegraph Department;

(7) Physically handicapped persons are accorded priority III for consideration against vacancies of Central Government Departments.

State Government:

(1) Government of Andhra Pradesh directed that physically handicapped persons namely blind, deaf and dumb, after completing training in school, specially opened for them should be given preference in filling up posts in various services and departments in which they could be employed without serious detriment to efficiency. The Government also directed that where the posts exist in any service or Department the appointing authority should circularise the vacancies to the Director of Employment and Training, Government of Andhra Pradesh.

(2) The Government of Andhra Pradesh with the concurrence of the Andhra Pradesh Public Service Commission have granted an age concession of 10 years over and above the existing upper age limit prescribed for direct recruitment to posts for various services of the State to Physically Handicapped persons so as to enable them to compete for posts to which they are considered suitable.
(3) The Chairman of Andhra Pradesh State Road Transport Corporation has agreed to provide free travel facilities to Physically Handicapped persons with attendants for the journeys on the buses of twin cities of Hyderabad and Secunderabad to and from the Special Employment Exchange for the Physically Handicapped, Hyderabad as well as for interviews with their employers. Physically Handicapped persons who present from "X-10 Reg. No. Card" of the Employment Department would be allowed to travel free with one attendant each.

(4) The Government of Andhra Pradesh have accorded Priority to physically handicapped persons for consideration against State Government vacancies.

Sri B. V. Gurumurthy:—The total number registered from the inception of the Exchange is 926. Appointments made up to 28th February 1966 is 326 and the number of people on the live register is 308, and it is expected that the balance might not have revived their applications or they must have been employed elsewhere without informing the Exchange. This is the position.

Sri B. V. Gurumurthy:—Different categories have got.

Typists 3, Peons 3, Washermen 3, Watchmen 6, Teacher 1, Class IV language Tutor 1, Tailors 2, Bakers 2, 67 in Orthopaedic category. Power loom 1, Music teachers 6, Factory workers 2. Assembly worker 1. Like this 101 have been given employment.

"The number of people given employment in Kurnool district during 1964" 300 300. How much people have been given employment in the year 1964? 300 300. How much people have been given employment in the year 1964? 300 300. How much people have been given employment in the year 1964?

Sri B. V. Gurumurthy:—No.

A proposal to reserve certain percentage of vacancies to the disabled persons is under consideration of the Government in General Administration Department.
I am unable to follow. If he passes on the information I will take it up with the Education Department.

Sri K. Govinda Rao (Anakapalle) :- Will the hon. Minister for Labour and Transport be pleased to state:

(a) whether Minimum Wages have been fixed for the hotel workers in the State;

(b) if so, whether they are actually implemented by all the hotels;

(c) what is the percentage of hotels which have implemented the Wages; and

(d) whether there is any proposal before the Government to enhance the Wages?

Sri B. V. Gurumurthy:—(a) Yes, Sir.

(b) and (c) Yes, Sir. The minimum rates of Wages are being paid by and large by all the hotel establishments. There is no appreciable violation in regard to payment of minimum wages when assessing in terms of percentage.

(d) Minimum Wages were fixed in 1962. Next revision which falls due early next year, will be undertaken in 1967 well in time.
Oral Answers to Questions. 14th March 1966. 33

S. No 841-A.

(2743-1) Q.—Shri V. Visveswara Rao (Mylavaram):—Will the hon. Minister for Revenue be pleased to state:

(a) whether it is a fact that the Land Remission and Water Tax Remission orders had not been issued in the drought affected areas;

(b) if so, why issue of remission orders delayed for a long time;

(c) will it not lead to coercion of the ryots for paying the taxes; and

(d) will the Government issue orders immediately?

101/1—5

SHORT NOTICE QUESTIONS AND ANSWERS

LAND REMISSION AND WATER TAX REMISSION IN DROUGHT AFFECTED AREAS.
Sri N. Ramachandra Reddy:—(a) No, Sir. Orders were already issued by the Government sanctioning the following:—

1. As in the case of widespread calamities full remission of land revenue for both wet and dry crops where the yield is less than 4 annas and half remission where the yield is between 4 and 6 annas will be granted, as per rules, for the current year.

2. The collection of arrears of land revenue and loan instalments will be suspended in the case of persons who are granted remission of land revenue during the current year.

3. Where the remissions are granted, the collection of Cesses will be suspended for the current year.

(b), (c) and (d) Do not arise.

SUB-CHANNEL TO THE KOOVADA KALVA.

S. No. 841-B.

S.N Q No. 2744-P:—Shri Vavilala Gopalakrishnayya:—

Will the hon. Minister for Irrigation and Agriculture be pleased to state:

(a) whether a sub-channel to the Koovada Kalva (Drain) is being excavated instead of the big Project in West Godavan district; and

(b) if so, how many acres will be cultivated?

Sri A. Balarami Reddy:—(a) Not yet, Sir.

(b) If the scheme materialises, an extent of 833 acres will be brought under new irrigation besides stabilisation of supplies to an extent of 4,986 acres of existing wet.

[Text in Telugu]
CALLING ATTENTION TO MATTERS OF URGENT PUBLIC IMPORTANCE:

re: COLLECTION OF LAND REVENUE WITHOUT DEDUCTING REMISSION AND AGITATION BY THE PEASANTS.

Sri N. Ramachandra Reddy: Government have issued instructions in December 1905 that whenever there is failure of crops due to drought conditions full remission of land revenue for both wet and dry crops be given, where the yield is less than four annas, and half remission where the yield of crops is between four and six annas. Instructions were also given that the collection of arrears of land revenue and loan instalments be suspended in the case of persons who are granted remission of land revenue during the current year. In Bangampalem sub-taluk of Chittoor district, land revenue is being collected only after allowing remission that is due to farmers under the rules under which the above instructions are issued. In Bangampalem sub-taluk itself, dry remission of Rs. 1.15 lakhs and wet remission of Rs. 84,000 were granted. The land revenue for the current year, after deducting the remission granted, is being collected from the farmers. If there are any cases of difficulty in the villages given notice of, such persons can always represent to the Collector who will certainly look into the matter and give the relief due to them. The Collector has been asked to look into the matter and expedite the matter.

Sri P. Rajagopala Naidu:—Thank you, Sir.
Calling attention to matters of urgent Public importance.

Continuous strike resorted to by students on non-functioning of mining institutions at Kothagudem and Gudur since 17th January, 1966.

RE: Exemption of levy in foodgrains for the ryots in Medak district owing to the distress experienced by them.

RE: Continuous strike restored to by students on non-functioning of mining institutions at Kothagudem and Gudur since 17th January, 1966.
Calling attention to matters of urgent Public importance.
Grave situation resulting from the failure of rains in Samalkot and non-Availability of drinking water.

RE: GRAVE SITUATION RESULTING FROM THE FAILURE OF RAINS IN SAMALKOT AND NON-AVAILABILITY OF DRINKING WATER.
The Minister for Municipal Administraion (Sri N. Chenchu Rama Naidu):—Sir, the Chief Engineer, Public Health who was requested to examine and submit proposals to tide over the water scarcity at Samalkot submitted certain proposals. One of the proposals involving tapping of water from Peddapuram Mains was considered to achieve the object of immediate supply of water at Samalkot. As it involved tapping of Peddapuram Water Supply Main, it was considered appropriate to consult Peddapuram Municipality also, to persuade them to agree to the proposal and help the neighbouring town and tide over the crisis. Discussions were therefore held on 16th February 1966 with officials and non-officials concerned and it was finally decided to request the Chief Engineer, Public Health to submit a revised proposal and to take necessary action for the supply of one lakh gallons of water to Samalkot by laying a pipeline from the filter beds. The Chief Engineer, Public Health, has submitted revised proposals estimated to cost Rs. 1.24 lakhs by pumping a quantity of one lakh gallons of filtered water per day from the filtering point of the Peddapuram Water Supply Scheme through a separate pumping main and supply water to Samalkot through 20 public fountains. This is to be a temporary measure for one year. There has been no delay in dealing with the situation. The revised estimate of Rs. 1.24 lakh is being approved and a sum of Rs. 1.24 lakh is being sanctioned as loan to Samalkot Municipality to meet the above situation.

PAPERS LAID ON THE TABLE.

G.O. Ms. No 536, Panchayati Raj (Samithi-III) Department, dated the 1st May 1965 issued under the Andhra Pradesh Panchayat Samithis and Zilla Parishads Act, 1965.

Dr. M. N. Lakshminarasiah:—Sir, I beg to lay on the table under sub-section (2) of section 69 of the Andhra Pradesh Panchayat Samithis and Zilla Parishads Act, 1959, a copy of G.O. Ms.
ANNUAL FINANCIAL STATEMENT (BUDGET) FOR YEAR 1966-67.

VOTING OF DEMANDS FOR GRANTS.

DEMAND No. XVIII—MEDICAL—Rs. 10,39,80,000.

DEMAND No. XIX—PUBLIC HEALTH—Rs. 4,55,16,000.

DEMAND No. XLIV—CAPITAL OUTLAY ON IMPROVEMENT OF PUBLIC HEALTH—Rs. 1,17,42,000.

The Minister for Public Health and Medical (Sri Y. Sivarama Prasad):—Sir, I beg to move:

"That the Government be granted a sum not exceeding Rs. 10,39,80,000 under Demand XVIII—Medical."

"That the Government be granted a sum not exceeding Rs. 4,55,16,000 under Demand No. XIX—Public Health,"
40  14th March 1966.  Annual Financial Statement (Budget)
Voting of Demands for Grants.

“That the Government be granted a sum not exceeding
Rs. 1,17,42,000 under Demand No. XLIV—Capital Outlay on
Improvement of Public Health.”

Sir, in the statement* that has been distributed to the
Members there is one correction to be made (in the English
version). On page 124, under the heading ‘Family Planning’ in
line 3, the figure ‘Rs 100’ should be corrected as Rs. 10.

Mr Deputy Speaker:—Cut motions moved.

DEMAND No. XVIII—MEDICAL—Rs. 10,39,80,000.
Sri P. Rajagopal Naidu:—Sir, I beg to move:
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.
For not increasing the bed strength in the maternity unit
in the Headquarters Hospital, Chittoor.
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.
For not completely spending the amounts allotted for the
eradication of leprosy.
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.
For the failure of the Government in supplying adequate
medicines to the Primary Health Centres in the State.

Mr. Deputy Speaker:—Cut motions moved.
Sri P. V. Ramana:—Sir, I beg to move:
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.
Failure to establish a Hospital Pharmacy for preparing
solutions for injections, etc., in Andhra Pradesh.
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.
Failure to supply drinking water to some of the wards
particularly to Rajendra Prasad Ward in King George Hospital,
Vishakhapatnam, due to which the patients are suffering a lot.
To reduce the allotment of Rs. 10,39,80,000 for Medical
by Rs. 100.

* Printed as appendix on pages 104 to 131,
Annual Financial Statement (Budget) 14th March 1966

for the year 1966-67.

Voting of demands for Grants.

Failure to take proper steps to kill cockroaches and insects prevailing in key lockers (boxes) placed by the side of beds of patients in King George Hospital, Visakhapatnam in spite of the letter addressed to the Superintendent, King George Hospital, Visakhapatnam by P V Ramana, M.L.A.

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

Failure to upgrading the subsidised Rural Dispensary at Munagapadu, Anakapalli taluk, Visakhapatnam district into regular Allopathic Dispensary, though the Munagapala Panchayat for the coming with contribution for recurring expenditure for medicines.

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

Mr. Deputy Speaker:—Cut motions moved:

Sri P. Subbiah:—Sir, I beg to move:

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

Failure of the Government in not providing wards to the chronic patients of T.B. in the General Hospitals of the State like Kurnool, etc

Mr. Deputy Speaker:—Cut motion moved.

Sri T. K. R. Sarma:—Sir, I beg to move:

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

the difficulties of the patients to get admission into the General Hospital, Kurnool and the negligence of the Doctors.

Mr. Deputy Speaker:—Cut motion moved.

Sri S. Vemayya:—Sir, I beg to move:

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

For urge on Government to provide adequate medicines to Government hospitals of Gudur, Kovoor, Allur and other taluk headquarters hospitals of Nellore district.
To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100

For the failure of the Government to supply medicines to the Government headquarters hospital, Nellore as they are not available now.

Mr. Deputy Speaker:—Cut motion moved.

Sri M. Ramgopal Reddy:—Sir, I beg to move:

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

For indecent and inhuman treatment being given to the patients at Government Maternity Hospital, Hyderabad.

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

Failure of Government for not controlling the bath rate.

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

For irresponsibility vaccinating the children at Ballampalli on 24th February 1966.

Mr. Deputy Speaker:—Cut motions moved.

Sri Vavilala Gopalakrishnayya:—Sir, I beg to move:

To reduce the allotment of Rs. 10,39,80,000 for Medical by Rs. 100.

To impress upon the Government to construct an air conditioned operation theatre at Guntur Government General Hospital and also to make to T.B. Sanatorium, Managallagiri as a teaching institute.

Mr. Deputy Speaker:—Cut motion moved.

Demand No. XIX—Public Health—Rs. 4,55,16,000

Sri P. Rajagopal Naidu:—Sir, I beg to move:

To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

For miserable failure of the Government in eradicating Malaria in the State even after spending large amounts.

Mr. Deputy Speaker:—Cut motion moved.

Sr. P. V. Ramana:—Sir, I beg to move:

To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

Failure to provide proper latrines to the workers of Jute Factory at Chittivalasa, Visakhapatnam district.

Mr. Deputy Speaker:—Cut motion moved.
Annual Financial Statement (Budget) 14th March 1966
for the year 1966-67.
Voting of Demand for Grants.

Sri K. Guruswamy Reddy:—Sir, I beg to move:
To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

Mr. Deputy Speaker:—Cut motions moved.

Sri S. Vemaya:—Sir, I beg to move:
To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

For the failure of the Government to revise the F.T.A. of the Taluk Health Inspectors and peons of others as there is no revision for decades together in the matter.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

To urge on Government High Flour Factory in the State to supplement the deficiency in the diet.

Mr. Deputy Speaker:—Cut motions moved.

Sri M. Ramgopal Reddy:—Sir, I beg to move:
To reduce the allotment of Rs. 4,55,16,000 for Public Health by Rs. 100.

For not arresting the menace of mosquitos in the State.

Mr. Deputy Speaker:—Cut motion moved.

In 1963, in cholera the deaths are 1,492 and in 1964 it is 5,939; Due to small-pox, in 1963 the deaths are 4,773 and it is 4,932 in
14th March 1966.

Annual Financial Statement (Budget)
for the year 1966–67

Voting of Demand for Grants.

Due to malaria, it is 4,977 in 1963 and 6,229 in 1964; Other fevers, it is 82,000 in 1963 and 87,000 in 1964; Due to Dysentery and Diarrhoea it is 13,000 in 1963 and 14,000 in 1964; Due to respiratory diseases, it is 16,000 in 1963 and 17,000 in 1964.

Births and deaths rates increased. In 1963 it was 15.95 and it is still going up; it is now 19.94. The death rate has gone up from 5.03 to 7.44.

The infant mortality rate increased. Infant mortality due to malaria is 6,229 in 1963 and 6,229 in 1964, Dysentery and Diarrhoea is 13,000 in 1963 and 14,000 in 1964; Due to respiratory diseases, it is 16,000 in 1963 and 17,000 in 1964.

Births and deaths rates increased. In 1963 it was 15.95 and it is still going up; it is now 19.94. The death rate has gone up from 5.03 to 7.44.

The whole theory of malaria eradication is based on the mosquito’s habits of resting on the interior walls after it has fed on some one’s blood.

What has happened was (there itself it is written). In some places the houses have no walls but only a preventive roof. In others, the mosquito does not settle on the walls, but prefers to go and take the blood of other victims at some other outdoor places. So, when you think of all these things, is the spraying going to be of any use for us? That is why, we are having so many mosquitoes. In this connection, I will illustrate here just one joke expressed by the ex-Secretary, Mr. Krishnaswamy. He was saying “We are doing everything, Sir, but the mosquitoes are not co-operating with us.”
Protected water supply and drainage is the main thing—that you will take them to all the villages and other places. They have started protected supply in 1848.

They are in success 90% of the houses they are supplying with pipe water.

90% of the houses they are supplying with pipe water.

Protected water supply and maintenance phase in District Headquarters. Take the other countries and see what they have done to implement their health programmes. Take for instance Britain. I shall refer to their main theme of attacking these diseases.

“Local Administration is mainly the responsibility of the County Borough Councils acting as health authorities. For certain functions relating to community hygiene, the urban and rural councils are the proper authorities”. They are mainly given the responsibility for tackling these diseases at the village level.
The basic principle of this structure is highly centralized planning and supervision, coupled with almost complete executive and operational decentralisation permitting almost 90% of the problems to be dealt with at local levels without disturbing the general and basic pattern in any way.

In Britain any Doctor now wishing to take up public practice must first get the consent of the Medical Practises Committee. In case there are sufficient number of doctors in the area already, it is one of the aims of the National Health Services to improve
Voting of Demand for Grants.

distribution of doctors so that everybody may have equal chances of first class medical attention and it is therefore essential to apply some limit to the number of practitioners in any given area.

"Doctors in the service may in addition receive mileage payments for visit to rural areas, inducement payments for practising within an area, unpopular areas, and grants or fees for special services such as the treatment of temporary residents and emergency patients. For the administration of such things, they are giving additional grants for these people to go and serve in the villages when it is necessary.

Graduates graduates who have passed the postgraduate diploma in public health, may be given payment of Rs. 300 per month. They may be given an additional grant for block level improvement. Medicine and Public Health integrate graduates who have passed the postgraduate diploma in public health and may be given an additional grant for block level improvement. The Director-General of Health Services at the time...

"We feel that although the abolition of the post of Public Health Commissioner and the complete merger of his organisation with the Directorate-General of Health Services at the time..."
of Independence was a move in the right direction, it has resulted in the weakening of the epidemiological, statistical and other aspects of public health activity."

"At the District levels we suggest that the designation of the officer should be District Medical and Health Officer. He will be responsible for medical care, public health and environmental sanitation services in the district. He will co-ordinate the work of all hospitals with a bed strength of less than 300 beds."

For the health organisation to develop on the lines which we have in view and for the placing of necessary emphasis on preventive aspects and the work at the periphery, we feel that it is necessary to bring into existence regional organisations in each State between the headquarters administration and the districts.

He is the chief authority for Medical and Health. It is all right. He does not have any voice in big hospitals where there are more than 300 beds. The Superintendent has to look after that.

In so far as the existing members of the services are concerned, it will be necessary to provide facilities for their orientation by organising courses of training of one to six months at the appropriate institutions so that the members of the Public Health Services get oriented into medical work and vice-versa. In a long-term programme, periodic shifting of personnel from Medical to Public Health side and vice-versa is desirable if they are ultimately to take the full responsibility for dealing with problems of medical relief and public health.
Dr. B. V. L. Narayana:—I want to tell these points. It is not amalgamation I suggest. I suggest co-operation and co-ordination between the two departments. Co-ordination is more essential than amalgamation. Even now at the District level unless the District Health Officer and the District Medical Officer co-operate together, I do not know how this is going to be useful for our State.

It is a mixture of preventive and curative medicine. Both were mixed up. This ended with four peoples’ death. A single Medical Officer was looking after both the curative and preventive medicine so much so that the work became overloaded and the net result was he was unable to notice whether date of the product kept there expired or not. In this connection, I want to tell the hon. Members one thing. I did not say at any time that the date-expired products produced any bad effect, but I do not know much if the date-expired products.
It has come to my knowledge that a bulk purchase of X-Ray equipments for our State is made with unusual rush and manner that causes suspicion for the following reasons:

"It is well known that there is an acute scarcity of X-Ray films in our country, and due to emergency films are required by the army, and even the existing X-Ray machines in the hospitals are lying idle for want of X-Ray films. Even in teaching hospitals due to film shortages routine investigations are not being able to be carried out. Then at this time the idea of purchase of 35 X-Ray equipments at a cost of Rs. 10 lakhs in a hurry clearly induces one to doubt whether the whole purchase has not been made just to help somebody. Is the Government thoroughly satisfied that the supply of X-Ray films is definitely available for all these 35 units and they will not rust idly, wasting public money, particularly at this juncture of national emergency when funds are needed for National Defence and National Development.

2. I learn reliably that the Health Department issued a G.O. in April 1965 to constitute a Technical Committee of Radiological experts (to draw broad specifications for purchasing X-Ray equipments to ensure purchase keeping in view technical superiority) and I learn the Stores Purchase Committee itself in a quite unusual hurry decided the purchase of equipments not according to specifications or quality on 21st October 1965 (i.e.), within 10 days of opening of tender.

In this connection, one fails to understand the reason for the necessity for the Stores Purchase Committee to decide the purchase of 10 lakhs of worth of equipments within 10 days without consulting the technical experts whereas tenders of lesser value of about Rs. 30,000 takes time of 4 to 5 months to be decided and tenders of above one lakh takes an average of 6 to 8 months to be decided.
Further, it has come to my notice there are already complaints in many places about the Escorts X-Ray units as selected by Stores Purchase Committee and this has been brought to the notice in the Assembly by a Hon'ble doctor-member. I reliably know when this matter was brought to the notice of the Health Minister and the Health Secretary, Mr. K. B. Lal, the Health Minister assured the hon. Member Dr. T. V. Chalapathi Rao and others that purchase will be stopped and a Committee of Radiological Experts including Dr. T. V. Chalapathi Rao will be constituted...

The Minister has promised Dr. Chalapathi Rao and he has also ordered the stoppage of the purchase at that moment, but I cannot understand how the purchase was gone through in spite of the Minister asking the purchase to be stopped.

What I came to know about is this: just to overcome this hurdle, they have called for a short meeting of the radiologists and got it okayed. What I want to say is this: this purchase within such a short time is really very suspicious. I would request the hon. Minister, if it is possible to lay the whole matter on the Table of the House—how the purchase took place; what were the opinions of the different radiologists; whether all the tenders were scrutinised; and all that. Why I am telling this is, because we know how the X-Ray plants are working in this State. So far as I know about the plants working in the State, I would like to point out some of the complaints about them: the X-Ray equipment which has been supplied to Kurnool hospital is not working properly; it costs about Rs. 4 lakhs. In the same way, the deep X-Ray plant at Guntur is going out of order.

A number of plants have been ordered and kept idle. E.N.T. Hospital—since 1965 March, it is lying idle without being fitted up. E.S.I. Hospital, Since March 1965 it is lying idle; E.S.I. Hospital—another plant has been lying idle since March 1965, T.B. Hospital, the plant was supplied 1½ years back; Tirupathi Medical College—one plant was supplied 2½ years ago and it is still lying there for want of room and current; here in the city, plants were supplied but there was no current. What I am pointing out is, we are purchasing in haste without knowing whether there was current or room, whether the room available was sufficient for the erection of the plant. What I would like to suggest is this: if you want to install any X-Ray plant, make sure whether there is current at the place; next thing is, see that the current is brought to that room and that connections are given to that room. It's a laborious job. When once the plant is brought there, to get connections takes a long time.

The Public Works Department has to estimate; the estimates have to be approved; then connections must come; and after the
connections come, another man has to give a certificate of approval. All these take months and months and years and years in some cases. I would like to point out that public money should not be wasted in this way and the Department should see that these things should not happen once again.

They nominate the local doctors in every place where they are popular and are having experience. They give a sort of a certificate. If you want to pay money for those people, you ask them to go and get operated anywhere from any doctor and let them get a certificate to the effect that they had the operation, and have this money of Rs 10 disbursed to them. Rupees 10 is the minimum. But even that money, I would like to suggest—it must be given not by the B.D.O. What happens to this money is: just like the distribution of manure, this money will not be distributed properly. As such, I suggest that this money should be distributed by appointing some doctors in the local areas and let them give. Let them get the operation done and let them produce the certificate that they got the operation and money could be given at the local treasuries. So far as their financial position is concerned, they can get the certificate from the local tahsil or other men.

Medical colleges at admission rules (57% native place Nellore apply B.Sc. courses)

Regional allotment rules (56% medical college at 57% seats B.Sc. course start)

nursing courses
Voting of Demands for Grants

Annually, staff nurses are appointed with B.Sc. course in nursing and pass out in the upper grade. The problem is, how to appoint staff nurses who have a B.Sc. course in nursing, and promote them to appointments and promotions. Regional favouritism and promotions are not acceptable. Bio-Chemist Professor and civil surgeons are professors who are non-medical people and they are professors who are medical people also. It has been brought to my notice that in one instance a non-medical man who was working for the last 10 years was not given promotion. Till then the Department was promoting non-medical men also and they got a non-medical man who was working as professor now. They said, when the question of promotion came, "you are a non-medical man. Now we changed the rules and we are giving promotion only to medical men". The same man is working at Kakinada as Professor of Bio-chemistry. To bring him down as tutor is really very unfair.

How they put down a man from getting promotion? There are Bio-chemist Professors who are non-medical people and they are professors who are medical people also. It has been brought to my notice that in one instance a non-medical man who was working for the last 10 years was not given promotion. Till then the Department was promoting non-medical men also and they got a non-medical man who was working as professor now. They said, when the question of promotion came, "you are a non-medical man. Now we changed the rules and we are giving promotion only to medical men". The same man is working at Kakinada as Professor of Bio-chemistry. To bring him down as tutor is really very unfair.

Private practice conspires him to examine a man. The code of ethics is there that he cannot refuse to give his opinion to examine him. General Hospitals and special wards increase the code of ethics is there that he cannot refuse to examine a man. The code of ethics is there that he cannot refuse to examine a man. The code of ethics is there that he cannot refuse to examine a man. The code of ethics is there that he cannot refuse to examine a man.
poor people in general ward and in special hospital. The hospital has special wards for poor people in general ward and consultant hospital. Special treatment is available in special wards. Let them consult in the hospital itself; if they have got private consultation.

Let them consult in the hospital itself; if they have got private consultation.

Vo'ing of Demands for Grants

The following are the demands for grants for the year 1966-67.

**Budget 1966-67**

- **100 Rupees** for the budget.

**Note:**

- The total budget for the year is 100 Rupees.
- The budget includes various categories such as education, health, and infrastructure.
- The budget is approved by the council and presented to the budget committee.
- The budget is subject to review and approval by the financial advisor.

**Additional Information:**

- The budget is prepared in consultation with various stakeholders.
- The budget is reviewed annually and adjustments are made accordingly.
- The budget is subject to approval by the council and financial advisor.

**Conclusion:**

The budget for the year 1966-67 is approved and presented for consideration. The council is urged to review the budget and make necessary adjustments. The budget will be monitored closely to ensure its effectiveness and efficiency.
Annual Financial Statement (Budget) for the year 1966-67.

Voting of Demands for Grants

36 14th March 1966.

For the year 1966-67, Voting of Demands for Grants

Social welfare state equipment.
human equipment material equipment, buildings etc.

For the year 1966-67.

Voting of demands for Grants

1) Private practice

2) Fix up outpatient and inpatient time for time to time admission of patients

- Contractors in D. M. S. Office

- 15 days before treatment of a patient

- D. M. S. Office contractors influence

- D. M. S. Office contractors influence

- D. M. S. Office is independent

- Patients admitted 4 times

in-patient

Voting of Demands for Grants,

it is too early to say.

it is too late to say.

Advisory Committee.

efficient superintendent.

private practice.

private fees.

isolation ward.

isolation equipment.

BDg photos.

Head of the Department.

Deputy Director.

I. A. S.

Head of the Department.

I. A. S.

elementary Knowledge.

 elementary Knowledge.
I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment. I have no objection, but he must be responsible to get his own treatment.

Call Attention notice. D. M. S. & D. M. O.

Attention notce. Advanced cases X’ Ray plant. D. M. S. K. L. N. Rao garu. 20 beds to be re-arranged. 30 beds to be arranged. D. M. O. 30 beds to be arranged. 30 beds to be arranged. 30 beds to be arranged.
discretion 50, 60. philanthropic people 30, 60. Bed strength 30, 60.

That is a very clear confession and admission on the part of
the department for which I must congratulate—not that every-
thing is O.K. but at least they have admitted the condition
there and it deserves to be rectified.

I am confident that the day will not be far off when ultima-
tely all the taluk hospitals in the State will get covered; this
will doubtless ensure better medical aid within the reach of
the common man".

62 14th March 1966.

This statement is about the financial aspects of X-ray Plant.

Voting of Demands for Grants.

Discrimination in X-ray Plant function.

A few selected politics are discussed as well.

There is a shortage of X-ray films.

This is an important issue in the context of the financial analysis.
Annual Financial Statement (Budget) for the year 1966-67. 14th March 1966. 63

Voting of Demands for Grants

This page has details about the annual financial statement for the year 1966-67, covering the budget for that year. It mentions the integrated course and the integrated course, among other items. The text is in English, and there is a mention of voting demands for grants. The page also discusses the out-patient department and other medical services.
Voting of Demands for Grants

...
Annual Financial Statement (Budget)  
Voting of Demands for Grants

pass 10 seats 35 seats 35 seats on the 6th seat 35 seats on the 6th seat 35 seats on the 6th seat.

Voting of Demands for Grants ...
said 100 and 70 seats 100 and 70 seats in the headquarters of the hospitals in the headquarters of the hospitals. 
The hospital in the headquarters 30 beds in the headquarters hospitals 30 beds in the headquarters hospitals. 

Health centres in headquarters. Health centres in headquarters 3 beds in headquarters 3 beds in headquarters.

Rural side neglect in the hospitals 100 beds in the hospitals 100 beds in the hospitals. 

Mobile vans 100 beds in the hospitals 100 beds in the hospitals. 

Medical College on the condition of 30 medicines on the condition of 30 medicines. 

Lady doctors 50%. Lady doctors 50%. Medical College 20 seats 20 seats in the 20 seats in the founding of 20 seats in the founding of medicines 100 seats 100 seats in the 100 seats in the founding of 100 seats in the founding of medicines 100 seats 100 seats in the 100 seats in the founding of 100 seats in the founding of medicines. 

101/1—9

For the year 1966–67, D. M. O. recommends the following demands for grants:

- **Medical Stores**: Supply medical stores at the Health Department.
- **Health Inspectors**: Visit to hotels for cleanliness and health important demands.
- **Medical and Health Staff**: Work for the demand of medical staff.

In summary, the importance of health and demand for medical staff are crucial for the Health Department.
Voting of Demands for Grants

Central Government 10% Students

Voting of Demands for Grants

Central Government 10% Students

Prevention is better than cure
Annual Financial Statement (Budget) 14th March 1966. 69
Voting of Demands for Grants

for the year 1966-67.

Annua! Financial Statement (Budget) 14th March 1966. 69<
Voting of Demands for Grants

Annua! Financial Statement (Budget) 14th March 1966. 69<
Voting of Demands for Grants
Annual Financial Statement (Budget) for the year 1966-67.

Voting of Demands for Grants

[Text in Telugu]

14th March 1966.
Annual Financial Statement (Budget) 14th March 1966.
Voting of Demands for Grants.

...

...
Voting of Demands for Grants.

...
Annual Financial Statement (Budget) for the year 1966–67.

Voting of Demands for Grants.

Consultation fees have been allocated for the year 1966-67. The allocation is to be utilized for consultation fees incurred in connection with the demands for grants. A sum of Rs. 15,000 has been proposed for consultation fees for the year 1966-67. The amount is to be utilized for the purpose as mentioned above.

The total allocation for consultation fees is Rs. 15,000 for the year 1966-67. This amount is in addition to the expenditure incurred in the previous years. The expenditure incurred in the previous years is to be included in the current year's allocation.

The allocation for consultation fees is expected to be utilized efficiently to meet the demands for grants. The expenditure incurred in the previous years is to be included in the current year's allocation to ensure that the budget is balanced.

The allocation for consultation fees is an important aspect of the budget, as it ensures that the demands for grants are met without any delay. The allocation is to be utilized efficiently to meet the demands for grants.

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Annual Financial Statement (Budget) 14th March 1966

Voting of Demands for Grants.

625 रुपये संपूर्ण हैं। राजकीय अन्वेषण के लिए मांगेंगे 3,500 रुपये। 5,200 रुपये संपूर्ण हैं। यह अन्वेषण के लिए आज़ादी चाहिए। राजकीय अन्वेषण 1,380 रुपये। 1,870 रुपये चाहिए। राजकीय अन्वेषण 1,243 रुपये।

1,645 रुपये। राज्य में रक्षा 7,700 रुपये। राज्य में संबंधित 3,500 रुपये। राज्य में संबंधित 1,870 रुपये। राज्य में संबंधित 1,243 रुपये।

65-66 के 30 जुलाई तक राज्य में संबंधित 3,500 रुपये। राज्य में संबंधित 1,870 रुपये। राज्य में संबंधित 1,243 रुपये।
Annua! Financial Statement (Budget) 14th March 1966.
Voting of Demands for Grants.

Voting of Demands for Grants.

Health Centres: 25 beds 100 beds 400 beds
Drainage schemes: 10 beds 10 beds 10 beds

Quorum bell was rung.

(Quorum bell was rung)
Annual Financial Statement (Budget) 14th March 1966

Voting of Demands for Grants


Blood test in the area of 3 headquarters. Blood test at headquarters of 3 headquarters.

Plan is to increase the number of staff by 1,500, 2,000 as per the demand. Additional staff is required at headquarters.
Annual Financial Statement (Budget) for the year 1966–67.

Voting of Demands for Grants

The health side


Annual Financial Statement (Budget) for the year 1966–67.

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The health side


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Voting of Demands for Grants
Annual Financial Statement (Budget) 14th March 1966.
Voting of Demands for Grants

Health Department in recognised majority union I.N.T.U.C. Director as union representation for recognised union work. Health schemes, Medical schemes recognised majority union workers as union initiative. Buildings attended by union workers encouraging attendance. Attendence and efficiency recognised majority union. Workers educated about the workers encouraged. X-ray plant 40 out of order expert case.

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Correspondence with experts in 40 languages? telegraph, telephone, expert correspondence. 40 languages? correspondence.


T.B. Patients: Bilateral effect. Liberalise the rules and then admit them. They must be treated.

T.B. Patients: Bilateral effect. Liberalise the rules and then admit them.
Voting of Demands for Grants

procedure would Rural dispensary counter signature be passed. lengthy procedure cut-short would Rural dispensaries dispense funds allotted 15% should be spent on medical demand 15% funds allotted 15% funds allotted. Of course Central Act amend suggested suggestion 18 weeks. 18 weeks maternity benefit machinery out of order 18 weeks maternity benefit 18 weeks
86  14th March 1966  Annual Financial Statement (Budget)
Voting of Demands for Grants

When the machinery goes out of order why should the poor worker be deprived of the maternity benefit? Therefore, an amendment to that effect is to be made by our assembly or recommended to the Government of India.

... mental patient in hospital... Police enquiry shall have first class magistrate certificate of the police. As a lengthy procedure, it should be decided whether this patient is mental patient, whether this patient is mentally affected or not. Certificate of the police hospital will have to decide whether this patient is mental hospital or not. A first class magistrate certificate of the police guides the doctors. A mental hospital or mental hospitals’ patients hospitals are the only thing to think. We need to have medical workers demands and nurses BSc BEd special allowance for efficiency integration seniority and integration seniority consult. We have 35 X-ray plant and 10 table. 10 table...
Annual Financial Statement (Budget) 14th March 1966.
for the year 1966-67.

Voting of Demands for Grants

Sri N. Prasada Rao—On a point of order. Sir, he is reading his speech. That cannot be a reply.

Sri T. V. Raghavulu—he is not reading. He is only referring to certain papers.

Mr. Deputy Speaker:—With the permission of the Chair he could do it.

Sri N. Prasada Rao—He is not going to read the whole thing.

Mr. Deputy Speaker.—I know you could do it.

Mr. Deputy Speaker.—He is not going to read the whole thing.

Medical colleges and admissions

Sri N. Prasada Rao—On a point of order. Sir, he is reading his speech. That cannot be a reply.

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Mr. Deputy Speaker:—With the permission of the Chair he could do it.

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<table>
<thead>
<tr>
<th></th>
<th>Targets envisaged at the end of III Plan.</th>
<th>Targets achieved.</th>
<th>Targets by the end of the IV Plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seats in Medical Colleges</td>
<td>1040</td>
<td>1120</td>
<td>1200</td>
</tr>
<tr>
<td>No. of hospital beds</td>
<td>20,700</td>
<td>22,700</td>
<td>30,620</td>
</tr>
<tr>
<td>Population for one hospital bed</td>
<td>1800</td>
<td>1800</td>
<td>1140</td>
</tr>
<tr>
<td>No. of doctors</td>
<td>6000</td>
<td>6000</td>
<td>10,400</td>
</tr>
<tr>
<td>Population for one Doctor</td>
<td>6000</td>
<td>6000</td>
<td>3,500</td>
</tr>
<tr>
<td>No. of Nurses</td>
<td>4700</td>
<td>4700</td>
<td>6,300</td>
</tr>
<tr>
<td>Population for one nurse</td>
<td>7650</td>
<td>7650</td>
<td>5,714</td>
</tr>
</tbody>
</table>

Chinese aggression, Pakistan  

Dr. B. V. L. Narayana  

Malaria medicine control  

Malaria Eradication Programme  

Malaria germs carry  

Malaria germ carry
Voting of Demands for Grants

To develop germ eradication slides in villages of Hyderabad city. The demand for this is to settle a committee.

Health and Medical Departments to settle the purchase of plant "area". The specifications are to be handled by the committee.

Plant Store Purchase Department to handle tenders. The specifications are to be handled by the committee.

A blacklist company has to be blacklisted. 101/1—12
Black listed company

Voting of Demands for Grants

Black listed company

Plant Supply

Vice-Chancellors
Annual Financial Statement (Budget) 14th March 1966.

Voting of Demands for Grants

The Vice-Chancellors decided that the University Vice-Chancellors do not possess Ph.D. degree. He is a non medical man and he is only an M.Sc. According to the rules, a non medical man should possess Ph.D. degree. Then only he can be taken. Otherwise, if he is a M.B.B.S. and M.Sc., he could be taken. In this case, he is only an M.Sc.

Mr. Deputy Speaker:—He has told you. Non medical man with Ph.D.

The Vice-Chancellors decided that the M.Sc. pass a non medical subject, M.B.B.S., and that the M.Sc. Chemistry is a non medical subject. M.B.B.S. Chemistry is not a medical subject. It is not a medical subject, it is a chemical subject.

Other demands were discussed. Private consultation hospital is not to be

allowed. Private consultation hospital is not to be allowed. It is not to be allowed.
14th March 1966.

Annual Financial Statement (Budget) for the year 1966-67.

Voting of Demands for Grants

- Bed increase
- Medical Stores
- Primary Taluk Hospitals
- Primary Secondary Hospitals
- Treatment Centres
- Open Private Practice
- Hospital equipment repairs
- Isolation Hospital
- Indian Medicine
- Technical Medical Officer

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for the year 1966-67.

Voting of Demands for Grants

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Voting of Demands for Grants

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Annual Financial Statement (Budget) for the year 1966–67.

Voting of Demands for Grants

Dr. M. Chenna Reddy:—I would clarify it, Sir.

What I said was that the Centre was contemplating to take over the Osmania Medical College and upgrade it. In that case in lieu of the seats that are going to be converted into postgraduate seats naturally there would be additional seats provided. In that context when the matter was discussed, the representatives of the Central Government have been requested to have a Regional Medical College in Nizamabad. The upgrading of the Osmania Medical College is being delayed and we are pressing for its upgrading. When it comes about, the other College may be started.

They are going back.

We are not opening, Sir.

Dr. M. S. 

Success.
Annual Financial Statement (Budget)
Voting of Demands for Grants

14th March 1966.


Voting of Demands for Grants

Complaints 20, 20, 20, 20

Increase in bed strength:
- 15 beds
- 30 beds

Private practice:
- 30 beds

P. H. C.

(Handwritten notes)

Increase in bed strength:
- 15 beds
- 30 beds

Private practice:
- 30 beds

(Handwritten notes)

Increase in bed strength:
- 15 beds
- 30 beds

Private practice:
- 30 beds

(Handwritten notes)
Annual Financial Statement (Budget)  
Voting of Demands for Grants,

What earthly business has the department got to change it?

101/1—13
14th March 1966.

Annual Financial Statement (Budget) for the year 1966–67.

Voting of Demands for Grants.

...
Annual Financial Statement (Budget)  
Voting of Demands for Grants.


Voting of Demands for Grants.
14th March 1966.

Annual Financial Statement (Budget) for the year 1966-67.

Voting of Demands for Grants.

Mr. Deputy Speaker—The question is:

To reduce the allotment of Rs. 10,39,80,000 for Medical by—-Rs. 100.

For not increasing the bed strength in the maternity Unit in the Headquarters Hospital, Chittoor.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

For not completely spending the amounts allotted for the eradication of leprosy.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

For the failure of the Government in supplying adequate medicines to the Primary Health Centres in the State.

The motions were negatived.

Mr. Deputy Speaker: The question is:

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure to establish a Hospital Pharmacy for preparing solutions for injunctions, etc., in Andhra Pradesh.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure to supply drinking water to some of the wards particularly to Rajendra Prasad Ward in King George Hospital, Visakhapatnam due to which the patients are suffering a lot.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure to take proper steps to kill Cockroaches and insets prevailing in key lockers (boxes) placed by the side of beds of patients in King George Hospital, Visakhapatnam in spite of the letter addressed to the Superintendent, King George Hospital, Visakhapatnam by P. V. Ramana, M.L.A.
To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure to upgrading the subsidize rural Dispensary at Mungapadu, Ankapalli taluk, Visakhapatnam district into regular Allopathic dispensary though the Munagapala Panchayat for the coming with contribution for recurring expenditure for medicines.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

The motions were negatived.

Mr Deputy Speaker:—The question is:
To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure of the Government in not providing wards to the chronic patients of T.B. in the General Hospitals of the State like Kurnool, etc.

The motion was negatived.

Mr Deputy Speaker: The question is:
To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

the difficulties of the patients to get admission into the General Hospital, Kurnool and the negligence of the Doctors.

The motion was negatived.

Mr. Deputy Speaker:—The question is:
To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

For urge on Government to provide adequate medicines to Government hospitals of Gudur, Kovoor, Allur and other taluk headquarters hospital of Nellore district.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

For the failure of the Government to supply medicines to the Government Headquarters Hospital, Nellore as they are not available now.
To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs 100.

For indecent and inhuman treatment being given to the patients at Government Maternity Hospital, Hyderabad.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

Failure of Government for not controlling the birth rate.

To reduce the allotment of Rs. 10,39,80,000 for Medical by—Rs. 100.

For irresponsibility vaccinating the children at Bellampalli on 24th February 1966.

The motions were negatived.

Mr Deputy Speaker —The question is:

To reduce the allotment of 10,39,80,000 for medical by Rs. 100.

To impress upon the Government to construct a air conditions operation theatre at Guntur Government General Hospital and also to make to T.P. Sanitorium, Mangallagiri as a teaching institute.

The motion was negatived.

Mr Deputy Speaker —The question is:

To reduce the allotment of Rs. 4,55,16,000 for Public Health Rs. 100.

For miserable failure of the Government in eradicating Malaria in the State even after spending large amounts.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100.

Failure to provide proper latrines to the workers of Jute Factory at Chittiivalasa, Visakhapatnam district.

The motions were negatived.

Mr Deputy Speaker: The question is:

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100.
Voting of Demands for Grants.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100

The motions were negatived.

Mr. Deputy Speaker:—The question is:

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100.

For the failure of the Government to revise the F.T.A. of the Taluk Health Inspectors and peons of others as there is no revision for decades together in the matter.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100.

To urge on Government High Flour Factory in the State to supplement the deficiency in the diet.

To reduce the allotment of Rs. 4,55,16,000 for Public Health by—Rs. 100.

For not arresting the menace of mosquitoes in the State.

The motions were negatived.

Mr. Deputy Speaker:—The question is:

"That the Government be granted a sum not exceeding Rs. 10,39,80,000 under Demand No. XVIII—Medical."

"That the Government be granted a sum not exceeding Rs. 4,55,16,000 under Demand No. XIX—Public Health."

"That the Government be granted a sum not exceeding Rs. 1,17,42,000 under Demand No. XLIV—Capital Outlay on Improvement of Public Health."

The motions were adopted.

The House then adjourned till Half Past Eight of the clock on Tuesday, the 15th March 1966.
APPENDIX.


Sri Y. Sivarama Prasad:—

Mr Speaker, Sir:

I move that the Government be granted a sum not exceeding Rs. 10,39,80,000 under Demand No. XVIII—Medical, Rs. 4,55,16,000 under Demand No. XIX—Public Health and Rs. 1,17,42,000 under Demand No. XLIV—Capital Outlay on Improvement of Public Health.

Introduction:

A healthy nation is a happy nation. As a result of measures undertaken during the First, Second and Third Plans, there has been considerable improvement in the health condition of the people generally, which is reflected in the lower incidence of disease, decrease in infant mortality, general decline in mortality rates and increase in the expectancy of life. The State of Andhra Pradesh has made rapid progress in the development of Public Health facilities contributing its own share towards the formation of a "Welfare State" within the resources available at its disposal.

The number of Medical Institutions at the beginning of the First Plan was too small to provide a reasonable standard of the Medical services to the people and more so to the people in the rural areas. While so, the creation of more hospital facilities was thus needed, resources at the disposal of the Government were not able to meet the needs. Added to this, the extreme dearth of technical personnel also created a problem in the speedy execution of the schemes.

The problems of scientific and technical man-power began to assume added significance only after the beginning of the Second Plan period. After the merger of Telengana and Andhra, and the formation of Andhra Pradesh, a review of the existing arrangements for the supply of technical Man-Power was undertaken. The general aim of the Medical problems during the Second Five-Year Plan was to expand medical services so as to bring them increasingly within the reach of all the people like providing hospital facilities, an effective regional system of hospitals, co-ordinated hospital system with its free flow of Medical Services to provide satisfactory Medical care both in Urban and Rural areas. While the creation of more hospital facilities were, no doubt, urgent, in view of the high cost of services, existing hospitals were developed so that they could be efficiently and economic. With these objectives in view of the Second Five-Year
Medical Plan of Andhra Pradesh undertook the implementation of 63 schemes, 44 in Andhra and 19 in Telengana at a total cost Rs. 578.10 lakhs. For the development of medical facilities in the State during Third Five-Year Plan period 99 schemes were included in Andhra Region and 49 schemes in Telengana Region.

During the Third Five-Year Plan an amount of Rs. 712.40 lakhs was provided for the Medical Department. After first two years, due to the National Emergency which arose in 1962, the Plan Outlay of Medical Department was reduced to Rs. 553.26 lakhs. Consequent of the reduction the needs for more amenities in teaching hospitals in the Medical Colleges and the development in the other sectors could not be fulfilled completely. The Government, however, restored this cut by providing certain additional funds to complete the sanctioned capital works. Thus the final allotment rose to Rs. 645.72 lakhs. This situation did not halt the developmental activities of the Medical Department. During the Third Five-Year Plan, the bed strength of the teaching hospitals was increased from 3,530 to 5,223 (an increase of 1,693 beds). In the District Hospitals the bed strength was increased from 1,383 to 1,878 (an increase of 495) and in Taluk Hospitals, it was increased from 417 to 845 (an increase of 428). In the T.B. Clinics, the bed strength, was increased from 1,243 to 1,647 (an increase of 404). The total bed strength is 7,700. It is expected that the bed strength during the Fourth Plan will be increased by 1,597.

A desirable fillip was also given to Medical Education during the Third Five-Year Plan.

35 X-Ray Plants were purchased during 1965-66 and they will be distributed to some District and Taluk Hospitals for the benefit of X-Ray diagnosis to the ailing patients in rural areas.

The strength of admissions in Government Medical Colleges was increased from 650 to 1,120. There was also an increase of Rs. 30 lakhs in the expenditure for medicines and equipment during the years 1964-65 and 1965-66.

In the Fourth Five-Year Plan the intake of the existing Medical Colleges will be increased from 1,120 to 1,250.

Proposals to open one more Regional Medical College at Nizamabad and the post-graduate Medical Educational Institute at Hyderabad (Osmania Medical College) have not been finalised yet, pending the approval of the Government of India who are being requested to expedite the sanction.
Other Schemes:

An amount of Rs. 2.08 crores is provided in the Fourth Plan for the construction of Headquarters Hospital buildings at Rajahmundry, Nellore, Sangaeddy, Srikakulam, Khammam, Nalgonda and Mahbubnagar, V.D Clinic Buildings and Female General Ward at Chittoor. Blood Bank and Children's Clinic at Karimnagar. Bed strength will be increased by 1,574 in all District Headquarters Hospitals taking the total to Rs. 3,946 at the end of the Fourth Plan. Also an amount of Rs. 2.22 crores is provided for the improvement of the taluk headquarters hospitals in the Fourth Plan the bed strength of which will be increased by 2,313 taking the total to 5,319. By the end of Third Plan it is expected that 330 Primary Health Centres would be in existence which will be increased to 448 by the end of the Fourth Plan for which an amount of Rs. 1.00 crore is earmarked.

During the Third Plan, 6 T.B. Clinics have been opened taking the total number of T.B Clinics and Hospitals in the State to 43 covering all the districts. Two more clinics are proposed to be opened in the Fourth Plan and the bed strength is proposed to be increased from 1,778 at the end of the Third Plan to 1,950 by the end of the Fourth Plan. Under the Leprosy Control Scheme, 3 Leprosy Sub-Centres were established during the Third Plan taking the total to 18 Leprosy Centres of which 2 have been converted into Leprosy Control Units. There are at present 73 Survey Education and Treatment Centres functioning in the State. It is proposed to establish 3 more Leprosy Control Units, 206 S.E.T. Centres and 3 Reconstruction Survey Units in the Fourth Plan.

Under Urban Family Planning Programme, 120 new Family Planning Clinics will be opened in the Fourth Plan taking the total to 185 for which an amount of Rs. 20 lakhs is provided towards the State's share.

43 Dental, 5 Eye and 9 E.N.T. Clinics and 6 Blood Banks will be established and the Drug Control Organisation and the Office of the Director of Medical Services will be strengthened with an outlay of Rs. 53 lakhs during the Fourth Plan. With these proposals, there will be 235 Dental, 21 Eye and 23 E.N.T. Clinics and 28 Blood Banks in the State, by the end of the Fourth Plan.

Indian Medicine:

An amount of Rs. 15.15 lakhs has been spent in the Third Plan for Indian Medicine mainly for opening additional dispensaries and strengthening research in Ayurvedic and Unani Medicines. During Third Plan, 54 dispensaries have been opened taking the total number of dispensaries to 153 at the end of the Plan.
Appendix

An amount of Rs. 90 lakhs is provided in the Fourth Plan for the establishment of 125 dispensaries, construction of buildings for Ayurvedic College Hospital, Research Department, etc., establishment of a Second Herbarium and improvements to the Indian Medicine Pharmacy.

PUBLIC HEALTH:

In terms of reference of economic development nothing can be considered of higher importance than the Health of the people which is a measure of their energy and capacity as well as potential of man-power for productive work in relation to the total number of persons maintained by the nation. The causes for the low state of health are many. They are mostly due to lack of hygienic environment conducive to healthful living, low resistance primarily due to lack of adequate diet and poor nutrition, safe water-supply, etc. During the First Plan period, the programmes of health developments were taken up with a view to remove some of the serious impediments of progress. In the Second Five-Year Plan the emphasis was laid on expanding health services to bring them increasingly within the reach of all the people and promote a progressive improvement in the level of national health.

The State programme during the Second Plan includes 52 schemes, 38 in Andhra and 14 in Telangana at a cost of Rs. 522.47 lakhs.

The revised provision for Public Health Programmes in the Third Plan is Rs. 5.66 crores. The Malaria Eradication and Small-pox Eradication programmes are the two principal Public Health Schemes in the Third Plan accounting for Rs. 5.40 crores. Under Small-pox Eradication programme, it is expected that by the end of Third Plan, 14 Eradication units will be functioning in the State and about 360 lakhs vaccinations will be done covering the whole population of the State. Both these schemes are expected to enter the maintenance phase during the Fourth Plan period.

Among the other schemes, under the Daya’s training programme, during the first three years of the Third Plan, 390 Indigenous Dayas were trained and it is expected that 535 Dayas will be trained by the end of the Plan period. Under Family Planning Programme, for which a provision of Rs. 6.86 lakhs has been made in the Third Plan, it is anticipated that about 150 Rural Family Planning Clinics and 20 Mobile Surgical Units for Vasectomy will be established by the end of the Plan bringing the total number of Rural Family Planning Clinics to about 321.
In the Fourth Plan, a provision of Rs. 9.00 crores is made for Public Health Programme. The distribution of the proposed outlay on major components of the Public Health Programmes during the Fourth Plan and the comparative figures for the previous plan are shown in the following table:

**OUTLAY ON PUBLIC HEALTH SCHEMES.**

<table>
<thead>
<tr>
<th></th>
<th>Third Plan (Anticipated)</th>
<th>Fourth Plan (Proposed*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. National Malaria Eradication Programme</td>
<td>461</td>
<td>215</td>
</tr>
<tr>
<td>2. National Filaria Control Programme</td>
<td>…</td>
<td>84</td>
</tr>
<tr>
<td>3. National Smallpox Eradication Programme</td>
<td>79</td>
<td>80</td>
</tr>
<tr>
<td>4. Maternity and Child Health</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>5. Family Planning Programme</td>
<td>7</td>
<td>122</td>
</tr>
<tr>
<td>6. Health Education and Nutrition Surveys.</td>
<td>6</td>
<td>51</td>
</tr>
<tr>
<td>7. Other schemes (including those under area plans.)</td>
<td>11</td>
<td>298</td>
</tr>
</tbody>
</table>

566 900

The objectives of the Health programmes in the Fourth Plan are to control communicable diseases and to bring down the present rate of growth in population.
The Honourable Members will kindly see that there has been a gradual rise in the number of beds in the hospitals, seats in the medical colleges, and other health giving schemes. Unfortunately, the National Emergency declared in 1962 in the wake of Chinese aggression continued and the subsequent repercussions have doubtless impeded the rapid expansion of the activities of both Medical and Public Health Departments consequently.

We are on the threshold of the Fourth Plan commencing from the next year 1966-67. Greater emergency due to the aggression of Pakistan has also prevented the Government of India and the State Governments from sticking to the draft plan. The Medical plan for 1966-67 has therefore been finalised with this background with a much smaller outlay.

The total outlay for the year 1966-67 has been fixed at Rs. 70 lakhs, out of which Rs. 40 lakhs will be utilised for the spill-over Capital works schemes and Rs. 30 lakhs for new Revenue schemes. Thus we are now faced with the situation which hampers our activities in no smaller extent.

Under Public Health, a sum of Rs. 107 lakhs only has been fixed as outlay for 1966-67, out of which a sum of Rs. 104.5 lakhs will be utilised for continuing schemes leaving a small amount of Rs. 2.45 lakhs for new schemes.

Under Indian Medicine a sum of Rs. 3 lakhs has been provided for new schemes during 1966-67, first year of the Fourth Five-Year Plan.

The Honourable Members will appreciate the difficult situation facing the country as a whole and the State in particular.

In spite of these financial limitations, the Government have under consideration proposals for strengthening the District Headquarters Hospitals and increasing the bed-strength of some Taluk Hospitals and provide facilities for Dental Care of the general public.

In all the districts where the administrative projects have been introduced, the District Medical Officers have been looking after the administration of the entire district including the Headquarters Hospitals. In order to provide better medical facilities to the people in Urban areas, the Government have sanctioned the employment of one additional Civil Surgeon Specialist in each of the District Headquarters Hospitals at Anantapur, Cuddapah, Eluru, Machilipatnam, Nellore and Nizamabad.
In the Medical College Centres like Visakhapatnam, Guntur, Kurnool, Hyderabad and Warangal the District Medical Officers have already been dissociated from hospital charge of the Headquarters and are functioning as full-time administrative officers as recommended by the W.H.O. I am glad to say that this system is working well and is yielding good results in controlling communicable diseases and implementation of National Programmes like National Malana Eradication Programme, National Small-pox Eradication Programme, etc. besides better supervision of Taluk Hospitals, Dispensaries and Public Health Centres. During 1966-67 it is proposed to appoint additional Civil Surgeon Specialists in District Headquarters Hospitals which are now in-charge of District Medical Officers excluding the following Hospitals which are attached to Medical Colleges:—

1. Visakhapatnam.
2. Guntur.
4. Warangal and
5. Hyderabad.

It is also proposed to sanction Civil Assistant Surgeons Anaesthetists in all District Headquarters Hospitals whose services are essential for undertaking operations and Civil Assistant Surgeons Pediatricians in seven selected District Hospitals during the year availing the assistance offered by the UNICEF.

I may also observe that the medical facilities in Taluk Hospitals are not very satisfactory, with the result the common man has to rush to the District Hospitals or to the Regional Hospitals at Visakhapatnam, Guntur, Kurnool, Hyderabad and Warangal or to rush to the nearest private hospitals involving heavy expenditure. Much could not be done for the Taluk Hospitals as the Governments attention was focussed on improving the medical education and securing services of the highly qualified medical officers, who have now become available in good numbers. To improve the conditions in the Taluk Hospitals it is proposed to increase the bed-strength in Taluk Hospitals in a phased manner so as to provide at least 50 beds in each of the selected hospitals.

In the case of Hospital at Vijayawada, it is proposed to increase the bed strength by 25. The operation theatre costing Rs. 65,000 will be sanctioned shortly. Two more Civil Surgeons will be attached to this hospital for imparting Clinical instructions to the candidates who will be taking up the D.M. & S. Course. The hospital at Vijayawada will thus have a full complement of Civil Surgeon Specialist in major specialities and also Assistant Civil
Appendix

14th March 1966

Surgeon Specialists in other minor specialities. More cannot be done on account of the inadequacy of the finances. However, with the introduction of this scheme during 1966-67, I am confident that the day will not be far off when ultimately all the Taluk Hospitals in the State will get covered. This will doubtless ensure better medical aid within the reach of the common man.

Dental care has received little attention so long. In the Fourth Five-Year Plan, it has been decided to start 25 units at the rate of 5 units per annum. It may not be sufficient to cover the majority of suffering public. The Government have therefore been considering whether the Dental clinics can be opened in Taluk Hospitals. To begin with about 8 more clinics will be started during the year 1966-67 and six clinics will be run by Honorary Dental Surgeons. To provide incentive for the Dental Surgeons to move to Talukas to man these clinics, they will be granted a loan of Rs. 5,000 each for purchasing equipment, etc., for their private clinics. It is again a matter well known to the Honourable Members that many of the children of the school-going age are suffering from Dental troubles which are not attended to at the proper time. The possibilities of bringing this scheme under the School Health Scheme are also being considered.

Honourable Members are aware that there is an ever increasing pressure on the two big hospitals at Headquarters, namely Osmania and Gandhi. The pressure should be relieved considerably to enable the specialists in the Hospitals to give adequate attention to the chronic and serious cases which require their attention. The Government have therefore under consideration proposals to provide larger out-patient treatment facilities in Hospitals and dispensaries situated at Central places within the twin cities. By this, medical aid will be available at the doors of the public of Hyderabad and Secunderabad.

Family Planning Clinics:

This is a Centrally sponsored scheme where 75% of pay and allowances and recurring expenditure will be borne by the Government of India. The salary of the State Family Planning Officer will be borne 100% by the Government of India. The staff suggested some 3 years back by the Government of India under the State Family Planning Bureau is not sufficient to cope up with the increased expansion of the Family Planning activities throughout the State. Even receipt compilation and consolidation of periodical reports at the State level is hampered very much due to paucity of sufficient staff attached to State Family Planning Bureau. With a view to gear up the State Family Planning Bureau so that we can shoulder the extra responsibilities, that may
arise out of the State wide reorganised Family Planning Programme, certain amount of additional staff is provided during the next year. This will streamline the Family Planning Administration at the State level.

In future it is proposed to centralise the purchase of contraceptives at the State level so that the standard and quantities of contraceptives could be ensured and distributed to the Primary Health Centres and to rural population. Towards this item an amount of Rs. 5 lakhs has been included in the budget. In view of larger number of Auxiliary Nurses Midwives being appointed at the rate of one per ten thousand as per the reorganised pattern, the imperative necessity is felt to standardise all the reporting forms for the Auxiliary Nurse Midwives, and get them printed at the State level so that standardised registers and uniform reporting could be ensured throughout the State. Sufficient provision has also been made under the State Family Planning Bureau to purchase sufficient number of vehicles, that may be released by the Government of India from time to time for the implementation of the Family Planning Programme in the State.

Family Planning:

The main objective of the Family Planning Programme is to reduce the birth rate to 25 per 1,000 as early as possible. It is possible to achieve this goal if 90% of the married couples in reproductive age-group adopt Family Planning. For this three conditions are essential, (i) Group acceptance, (ii) dissemination of information about Family Planning Programme and (iii) facilities for supply of contraceptives and operations. Around these three points the structure of Family Planning Organisation is built up.

In this State the programme was started in 1957. At present there are 306 Rural Family Planning Clinics attached to Primary Health Centres and 65 Urban Family Planning Clinics in cities and towns. In addition to these, there are 49 Family Planning Centres in the twin cities of Hyderabad and Secunderabad. A Health Visitor posted in each of these centres is going on house-to-house visits to motivate the couples for Family Planning and also provide necessary facilities. 50 posts of Health Visitors have also been sanctioned for the 50 taluk hospitals.

During the year 1965-66 the extended Family Planning Programme is taken up. This programme covers an area extending over 69 existing Primary Health Centres and 12 more Primary Health Centres to be established, which has entered the Malaria maintenance phase. Under this scheme 500 sub-centres will be established in these 81 Primary Health Centres. 500 Auxiliary Nurse Midwives and 500 Voluntary Workers will be posted in
these sub-centres. Their work will be supervised by 243 Family Planning Health Assistants. Also a staff of one Woman Assistant Surgeon, one Block Extension Educator, one Computer, and one Storekeeper have been sanctioned for each of the Blocks.

The Medical Officers of Primary Health Centres are being given one week training at District Headquarters and at Hyderabad to enable them to conduct vasectomy operation. To extend surgical facilities to rural areas ten Mobile Surgical Units are functioning in the State. 11 more have been sanctioned recently as to provide one for each district one for Greater Hyderabad. To educate the public on the issue, orientation training camps for 3 days duration are also being conducted for the village leaders by Family Planning Extension Educators.

With the introduction of Intra-uterine contraceptive device, i.e., I.U.C.D. (Loop) the Family Planning Programme entered into a new era. Facilities for insertion of Intra-Uterine Contraceptive Device are provided in all major hospitals and dispensaries in Hyderabad City, in all district hospitals and in taluk hospitals in which lady doctors are in position. Since July 1965 several lady doctors have received training in this regard.

During the year till January 1966, 6,529 I.U.C.D. (Loops) insertions have been done.

For the year 1966-67, 50,000 loop insertions and 46,000 sterilisations (31,000 male and 15,000 female) are fixed as targets under the Family Planning Programmes in the State. These targets have been fixed taking into consideration the population of Andhra Pradesh, the previous achievements in the field and the overall target fixed by the Government of India for the entire country. The following steps are contemplated to achieve the above targets for the coming year:

1) Strengthening of the existing Mobile Vasectomy Units by providing fully equipped Audio-Visual Vans for each district.

2) Providing financial incentives to the Panchayat Samithis and Local Bodies to organise large scale sterilisation camps or I.U.C.D. Camps.

3) To provide financial compensation to poor people towards loss of wages, etc., as a result of sterilisation operations.

4) To provide financial incentives to private practitioners with a view to make them take more active part in the field of Family Planning particularly in organising sterilisation operations.
(5) By increasing the basal Family Planning structure in the rural areas by providing Male Worker and one Female Nurse Midwife to concentrate on Educational approach in Family Planning.

(6) By providing Mobile I.U.C.D. Teams for the Districts under a qualified and trained Woman Medical Officer to organise inspection camps in the districts

MEDICAL EDUCATION.

The total number of annual admissions in the Medical Colleges including two private Medical Colleges up to March 1965 was 650. Due to the National Emergency the number of admissions was increased by 100 from the academic year 1965-66 with Central assistance. During 1964-65, the admission capacity of Sri Venkateswara Medical College, Tirupathi was increased from 50 to 100. There are at present six Government and two private Medical Colleges with an admission capacity of 1,120 every year as shown below:

1. Osmania Medical College, Hyderabad ... 150
2. Gandhi Medical College, Hyderabad ... 120
3. Andhra Medical College, Vizag ... 150
4. Guntur Medical College, Guntur ... 150
5. Kurnool Medical College, Kurnool ... 150
6. S. V. Medical College, Tirupathi ... 100
7. R. R. Medical College, Kakinada ... 150
8. Kakatiya Medical College, Warangal ... 150

1,120

During 1964-65, additional staff was sanctioned for starting of P.P.C. Courses at Osmania Medical College, Hyderabad, Gandhi Medical College, Hyderabad and Kurnool Medical College. Additional staff was sanctioned for pre-clinical and clinical courses at Sri Venkateswara Medical College, Tirupathi, Andhra Medical College, Visakhapatnam, Guntur Medical College.
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Guntur and Kurnool Medical College, Kurnool. Additional staff was also sanctioned for the Dental Wing attached to the Osmania Medical College, Hyderabad, during 1964-65.

During 1965-66, additional units in Medicine and Surgery were sanctioned at the Guntur Medical College, Guntur, and at Andhra Medical College, Visakhapatnam necessitated on account of increased admissions. A Fourth Unit was created in the Department of Medicine and Surgery in the Kakatiya Medical College, Warangal, and M.G.M Hospital, Warangal. In the Medical Colleges, Guntur and Visakhapatnam, two posts of Professor of Communicable Diseases (I.D.) one in each were created and they are also designated as Superintendents of I.D. Hospitals, Guntur and Visakhapatnam respectively. Eight posts of Professors or Civil Surgeon Lecturers and 4 posts of Tutors were created in the Department of Venereology and Dermatology of the Andhra Medical College, Visakhapatnam and Gandhi Medical College, Hyderabad. Guntur Medical College, Guntur and Kurnool Medical College, Kurnool. Additional staff was sanctioned in the S.V. Medical College, Tirupathi to provide teaching facilities to the pre-clinical classes, consequent on the increase of admissions from 50 to 100.

A Diploma Course in Medicine and Surgery, i.e., D.M. & S. Course was started at the Gandhi Medical College, Hyderabad and Guntur Medical College, Guntur for the benefit of the G.C.I.M (Andhra Pradesh) candidates with effect from January 1966. The duration of this course is two years. A batch of 50 students will be admitted initially at each of the two Medical Colleges and 25 students will be admitted in each College every six months thereafter. The E.S.I. Hospital, Sanatnagar, and the Government Hospital, Vijayawada, will be the clinical training centres for the students in respect of the Gandhi Medical College, Hyderabad, and Guntur Medical College, Guntur respectively.

During 1966-67, it is proposed to sanction additional staff in the Medical Colleges to meet the deficiencies in accordance with the standards laid down by the Indian Medical Council. It is also proposed to sanction additional staff for the Dental Wing, Osmania Medical College, Hyderabad, and for the College of Nursing (B.Sc.) at Hyderabad.

Training Programmes:

During 1965-66, a training centre for nurses has been sanctioned at Sri Venkateswara Ram Narain Ruia Hospital, Tirupathi, with an admission capacity of 25.

Under National Emergency Programme, the admissions in the training of Nurses and Auxiliary Nurse Midwives were increased by 105 and 100 respectively in the existing training centres,
It is also proposed to open a new training centre for the Auxiliary Nurse Midwives at the Government Hospitals, Nuzvid and Vijayawada.

The training imparted to other para-medical personnel, such as: Orthoptists, Opticians and Refractionists, Laboratory Technicians, etc., is quite adequate to meet the requirements of para-medical personnel in the various medical institutions in the State.

Hospitals and Dispensaries:

(i) Teaching Hospitals—During 1965-66, the bed-strength of the Mahatma Gandhi Memorial Hospital, Warangal and Sri Venkateswari Ram Naram Ruiia Hospital, Tirupathi, was increased by 100 and 108 respectively. Proposals for the strengthening of the Paediatric Departments at Government General Hospital, Kakinada, and Ruiia Hospital, Tirupathi are under the consideration of the Government.

During 1966-67, it is proposed to increase the bed-strength of some of the teaching hospitals by 375 for which buildings are available by providing necessary additional staff, equipment, etc., as shown below:

1. Govt. General Hospital, Guntur ... 60
2. Govt. General Hospital, Kakinada ... 60
3. Govt. General Hospital, Kurnool ... 150
4. Govt. Maternity Hospital, Hyderabad ... 80
5. Radium Institute, Hyderabad ... 25

375

(ii) District Headquarters Hospitals.—The construction of new Headquarters Hospitals taken up during the Third Five-Year Plan period at Srikakulam, Rajahmundry, Nellore, Nalgonda, Khammam and Mahabubnagar is under progress. District Headquarters Hospitals have been expanded by adding 495 beds and facilities for specialist treatment was also provided. Proposals for the establishment of Paediatric centres at the Headquarters Hospitals, Srikakulam, Nellore, Khammam; Sangareddy: Nalgonda and Karimnagar are under the consideration of the Government.

In the year 1966-67, it is proposed to increase the bed-strength of the District Headquarters Hospitals by 420 for which buildings
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are available by providing additional staff, equipment, etc as shown below:—

Govt. Headquarters Hospital, Anantapur .. 50
Govt. Headquarters Hospital, Cuddapah .. 50
Govt. Headquarters Hospital, Eluru .. 50
Govt. Headquarters Hospital Nizamabad .. 50
Govt. Headquarters Hospital, Khammam .. 100
Govt. Headquarters Hospital, Nalgonda .. 100
Govt. Headquarters Hospital, Mahaboobnagar 20

420

(iii) Taluk Headquarters Hospitals.—During the Third Five-Year Plan, the bed-strength of the Taluk Headquarters Hospitals was increased by 448 by providing additional staff, equipment, etc.

The construction of new taluk hospitals was also sanctioned in the following places:—

(1) 20-bedded ward at Kothapeta, East Godavari district.
(2) 14-bedded ward at Rayachoti, Cuddapah district.
(3) 30-bedded ward at Pulivendla, Cuddapah district.
(4) 20-bedded ward at Government Hospital, Rapur, Nellore district.
(5) New Hospital building and staff quarters at Palacole, West Godavari district.
(6) 12-bedded Maternity ward at each of the hospitals (Huzurabad, Sultanabad in Karimnagar district).
(7) 10-bedded wards in each of the Government Hospitals Atmakur, Wanaparthy, Gadwal; Narayanapet; Jedcherla in Mahabubnagar district.
(8) 10-bedded ward in Government Hospital at Jogipet, Medak district.
(9) 50-bedded new hospital at Chirala, Guntur district.

The Government have sanctioned the supply of 35 X-Ray plants to the District and Taluk Hospitals where there are no facilities for X-Ray diagnosis.

In the year 1966-67, it is proposed to increase the bed-strength of the taluk headquarters hospitals by 220 by providing necessary additional staff, equipment, etc.

(iv) Provincialisation of local Fund Medical Institutions.—During the Third Five-Year Plan, 14 Local Fund Medical Institutions were provincialised.
E.N.T. Hospital at Pratapgiri Kothi, Hyderabad:

The Sarojindevi Hospital, Hyderabad, which was functioning as a combined hospital for Eye and E.N.T. cases was developed into a full-fledged eye hospital with 250 beds diverting the E.N.T. beds and adding them equally to the Osmania General Hospital, Hyderabad, and Gandhi Hospital, Secunderabad with 25 beds each. Now arrangements are completed for the establishment of a separate Ear Nose and Throat Hospital at Hyderabad in Pratapgiri Kothi with 50 beds to be commissioned in 1965-66. In the month of November 1965, the Government have sanctioned necessary nucleus staff, for the establishment of this hospital and provided necessary equipment.

Out patient Dispensary for the New M.I.A. Quarters:

An Out-patient dispensary building was constructed in the new M.I.A. Quarters and commissioned in December 1965 by sanctioning necessary additional staff, equipment, etc.

Primary Health Centres:

The target fixed for the Third Five-Year Plan is to open 448 Primary Health Centres. So far, 364 have been sanctioned. The balance of 84 will have to be opened during the Fourth Five-Year Plan.

During 1965-67 it is proposed to open 22 Primary Health Centres.

The Government have enhanced the provision under medicines in the Primary Health Centres by Rs. 3,000 per annum for each Primary Health Centre, making the total as Rs. 7,000 for medicines.

At present, 48 Primary Health Centres are without Medical Officers and they are kept in charge of the Medical Officers of the neighbouring Government Medical Institutions. This shortage will be overcome with the coming of the next year batch of Medical graduates.

It is proposed to strengthen the taluk headquarters hospitals to serve as referral centres to the Primary Health Centres on the curative and Family Planning Programme. Besides the Primary Health Centres, 246 Rural Allopathic Dispensaries are functioning in the State to serve the rural population.

T.B. Control Programme:

Special attention has been paid for the expansion of T.B. Control Programme by upgrading the existing T.B. Clinics into District T.B. Control Centres and increasing the bed-strength of the present T.B. Hospitals by the employment of additional staff and providing equipment.
The District T.B Control Centre will undertake domiciliary treatment of the rural population round about the Centre. Similarly, the 8 T.B. Clinics at Visakhapatnam, Nallapatnam, Warangal, Mahabubnagar, Eluru, Kurnool; Nellore were upgraded into District T.B. Control Centres by providing additional staff and equipment with assistance from the Centre and UNICEF.

During the year 1966-67 it is proposed to upgrade 4 District T.B. Clinics into District T.B. Control Centres. The bed strength of the T.B. Hospital at Mangalagiri, Guntur district will be increased by 100, raising the bed-strength to 280.

**Leprosy Control Programme:**

During the Third Five-Year Plan, three Leprosy Subsidiary Centres were established besides establishing 73 Survey, Education and Treatment Centres in the Primary Health Centres. The Government have also sanctioned a full-time Assistant Director of Medical Services (Leprosy), who will be in charge of the Schemes.

During the year 1966-67, it is proposed to open 50 more Centres in the Primary Health Centres.

**V.D. Control Programme:**

All the District Headquarters Hospitals have V.D. Clinics except Sangareddy.

In the year 1966-67, it is proposed to open a V.D. Clinic in Sangareddy.

**Family Planning Programme:**

In the year 1966-67, it is proposed to open sixty Urban Family Planning Clinics at the Taluk Headquarters Hospitals.

**Laboratory Services:**

During 1965-66, additional staff and equipment was sanctioned for the Institute of Preventive Medicine, Hyderabad, in connection with the manufacture of Cholera vaccine.

The Government have accorded sanction to the purchase of a freeze dried plasma unit together with necessary equipment at a cost of Rs. 2.25 lakhs in the Institute of Preventive Medicine, Hyderabad, where the Central Blood Bank is located. This is a very important equipment to convert the wet plasma into dry plasma so that it can be stored at room temperature for long time. Availing the UNICEF assistance freeze dried small-pox vaccine will be made available shortly. Staff and equipment necessary has also been sanctioned.

During 1966-67, it is proposed to sanction additional staff and equipment to meet the present deficiencies in the Institute.
It is also proposed to open two E.N.T. Clinics, two District Laboratories, eight Dental Clinics, one Eye Clinic and two Blood Banks in the District Headquarters Hospitals.

Civil Defence Measures under National Emergency:

The Government have taken necessary steps for meeting the national emergency by providing civil defence measures at Visakhapatnam, Kaknada, Masulipatnam, Vijayawada and Hyderabad city.

During 1965-66, the Government have sanctioned a sum of Rs. 100 lakhs to meet the expenditure on the purchase of drugs and equipment for 15 Static First Aid Centres at Visakhapatnam.

The Blood Bank facilities at the Osmania General Hospital, Hyderabad, were strengthened by sanctioning additional staff in view of the national emergency.

The State have contributed sufficient numbers of Medical Officers and Nurses for the Army services. The Government have also sanctioned several concessions to the Medical Officers seconded to the Army service such as:

1. The period spent on field service will count double for civil service for probation and increment.
2. While considering promotions, the meritorious services rendered in military will be given preference.
3. 50% of the permanent vacancies of the Andhra Pradesh Medical Service shall be reserved for the Medical Officers returning from the Army service and they will be given preference for admission to post-graduate courses.
4. A family allowance of Rs. 250 per month will be paid to each of the Medical Officers of the Andhra Pradesh Medical Services seconded to the Army service and Rs. 75 per month to each of the Nurses who are likewise seconded.

To meet the emergent situation and normal equipment for the major Hospitals a sum of Rs 5 lakhs has been provided for the purchase of Ambulance Vans.

Drugs Control Organisation.

The Drugs Control Organisation was strengthened during the Third Plan period by sanctioning 12 additional Drug Inspectors and 2 Senior Drug Inspectors.

During 1966-67, it is proposed to further strengthen the Drugs Control Organisation by appointing additional staff so that every District may have at least one Drug Inspector.

To enforce the provisions of the Drug Control effectively a Police Wing consisting One Inspector, One Sub-Inspector, One Head Constable and two Constables has been sanctioned recently to be attached to the Crime Branch (C.I.D.) at Hyderabad.
PUBLIC HEALTH.

ACTIVITIES OF PUBLIC HEALTH DEPARTMENT.

Various national health programmes have been launched during the Third Five-Year Plan period in order to improve the health standard of the people. In addition to the national programmes there are special health services like Nutrition, Maternity and Child Health, School Health, etc. functioning in the State.

The salient features of the programmes undertaken by the Public Health Department are:

National Malaria Eradication Programme:

The State had participated in this national programme by establishing 33.5 National Malaria Eradication Programme Units covering the entire population in the State. Intensive spraying operations were carried out twice a year in the hyperendemic areas and once a year in the hypo-endemic areas. The epidemiological evaluation in the National Malaria Eradication Programme is aimed at ensuring the disappearance of indigenous malaria cases. So far 24.49 units entered the consolidation phase and only in 9.01 units the spray-cum-surveillance operations are being carried on now. The consolidation units will enter into maintenance phase after a gap of three years. So far 6.79 units are declared fit to enter into maintenance phase by the Independent Appraisal Team appointed by Government of India during 1965. These 6.79 units cover a population of 7.791 millions in 69 blocks. At present there are 69 Primary Health Centres and 12 more are to be established in the area covered by the units. The special committee appointed by Government of India for the preparation of National Malaria Eradication Programme units for maintenance phase has prescribed the scale of staff to be appointed and recommended that the staff in the maintenance areas should be integrated with the expansion programme of the Family Planning Services in Primary Health Centres.

During January 1966 another 4.44 National Malaria Eradication Programme units were projected for consolidation phase and 10.53 National Malaria Eradication Programme units for maintenance phase by the Independent Appraisal Team visiting the State.

An amount of Rs. 79.85 lakhs has been provided for National Malaria Eradication Programme for the year 1966-67 under Plan.

National Filaria Control Programme:

Under the National Filaria Control Programme three 'A' type units are functioning at Ramachandrapuram, Mandapeta and Kamareddy. Two urban units are functioning at Visakhapatnam and Hyderabad. A research-cum-training unit at Rayavaram in East Godavari district and a Bureau of Filariasis at Hyderabad.
are also functioning. The object of the programme is to map out areas where the disease is prevalent and to carry out control operations on an intensive scale. An amount of Rs. 4,38,200 has been provided for this purpose for the year 1966-67.

National Small-Pox Eradication Programme:

This is a national programme to eradicate small-pox by vaccinating the entire population simultaneously with all other States in the country. After completing the pilot projects, the scheme was launched on a full scale in September 1962. During the Third Five-Year Plan it was proposed to vaccinate a population of 320.30 lakhs. As against this proposed target, it is expected to cover a population of 351.03 lakhs by vaccination by the end of the Third Plan period. The programme is showing encouraging results and the incidence of Small-pox is almost negligible in the areas completely covered by mass vaccination. The scheme will continue during the IV Plan period. An amount of Rs. 14 lakhs has been provided for this scheme for the year 1966-67.

Plague Control Measures:

In order to ward off the recurrence of Plague in the districts adjoining Mysore State and to control its spread in the State effectively, one anti-plague unit is functioning in Chittoor district. The anti-plague scheme for Hyderabad City is also in operation to check recrudescence of plague. The total provision under this is Rs. 3.78 lakhs for 1966-67.

Mobile Epidemiological Research Unit:

As cholera is one of the major Public Health problems in the State, a Mobile Epidemiological Research unit has been started, with the object of undertaking special research on cholera and evolving suitable field methods for effective control measures. The laboratory staff have been trained.

The following items of work are proposed to be carried out for the first year of the Fourth Five-Year Plan.

1. A detailed study of Epidemiology of Cholera and Gastroenteritis in Hyderabad City throughout the year.
2. A study of cholera in endemic districts during Epidemics.
3. Training of Senior Health Inspectors for epidemiological investigations and surveys.

An amount of Rs. 0.35 lakhs has been provided for the continuance of this unit during the year 1966-67.

Anti-Yaws Campaign:

With the assistance of the International Agencies Yaws which is a special disease in Tribal area has been practically eradicated.
But there are still stray cases coming to notice and the possible recrudescence requires to be controlled effectively.

During the Fourth Five-Year Plan, it is proposed to conduct a resurvey in all the districts where the initial Treatment survey was conducted within two units previously.

During 1966-67, it is proposed to spend Rs. 45,000 under this programme.

**Family Planning:**

To motivate more and more people and to compensate the loss of wages, it has been proposed to give an incentive of Rs. 100 to each person who undergoes vasectomy operation provided his monthly income does not exceed Rs. 100 per month. An amount of Rs. 2 lakhs has been sanctioned through grants-in-aid to 321 blocks for the above purpose. Further an amount of Rs. 16.65 lakhs has been sanctioned for distribution to Panchayats Samithis and Municipalities for arranging sterilisation camps. These agencies will first incur the expenditure from their funds towards diet, drugs and transport of the persons operated in the camps and then ask for reimbursement from the State funds. The actual expenditure not exceeding Rs. 100 per head will be reimbursed to these agencies from the above fund.

To cater to the needs of training all the Family Planning Workers, two training centres one at Hyderabad and another at Visakhapatnam have been sanctioned with staffing pattern of one officer in charge and other technical instructors aimed at training 100 persons each year including Doctors (males and females), District Family Planning Officers, District Extension Educators, Health Visitor and Social Workers.

During the year 1966-67 the programme will be intensified further by taking up new steps like strengthening of the units at various levels, viz., the State, District and Block and the provision of incentives to the local bodies medical profession as well as the public for accelerating the progress of the activity. An amount of Rs. 1 crore has been provided under Plan Budget for 1966-67 and Rs. 21,79,300 has been provided under non-Plan.

**Birth and Death Registration and Vital Statistics:**

Vital statistics is of great importance in national planning and in evaluating the effects of planning. The Government of India have suggested some schemes for improvement of registration and vital statistics and meeting 75% of the expenditure. The schemes have been implemented during the year 1964-65. These schemes are progressing well.
The Government of India have supplied a punch card mechanical tabulation unit for carrying on the compilation of Vital Statistics. The machine unit has been functioning with full complement.

**B.C.G. Vaccination:**

During the Third Five-Year Plan, 3 more B.C.G. teams have been established raising the total strength of teams to 21.

The present modified B.C.G. vaccination campaign consists of the following programmes:

1. Mass B.C.G. vaccination campaign, through special teams moving from area to area.
2. New Born B.C.G. vaccination campaign in City hospitals and District Hospitals.
3. Door-to-door B.C.G. vaccination campaign at Hyderabad and greater Municipalities.
4. Municipal B.C.G. vaccination campaign through special staff of one technician, appointed for the purpose in each of 18 major municipalities.
5. School Health B.C.G. vaccination campaign in 4 district clinics, besides that of Hyderabad.
6. Hospital B.C.G. Vaccination campaign in three hospitals in Hyderabad City.

The B.C.G. vaccination Campaign is assisted by the UNICEF which provides vehicles, equipment and publicity materials.

During 1965-66 (up to December 1965), 23 lakhs persons were tested and 12 lakhs vaccinated. The existing 21 teams will be continued during the Fourth Plan period.

**School Health Services:**

For medical inspection of school children the establishment of school health clinics at the rate of one for each district has been taken up. So far 16 district school health clinics have been established. 4 more clinics are functioning in the city of Greater Hyderabad. During 1965-66 (up to December 1965) two lakhs children were examined.
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Maternity and Child Health Services:

Maternity and Child Health Services in the State endeavour to undertake total family care in general and supervision of pregnant and nursing mothers and children below 5 years in particular. By the end of 1964-65 in all 1,600 maternity and child health centres were functioning in the State. Out of these 35 centres are in the rural backward areas. During 1965-66, seven centres more have been established in the local bodies.

Most of the births in the rural areas are conducted by untrained indigenous dayas who adopt very old and primitive methods and crude instruments. In collaboration with the Government of India the training of indigenous dayas has been taken up. During the first four years of the Third Five-Year Plan 454 dayas were trained. During the year 1965-66, 71 more dayas have been trained.

Nutrition:

The Nutrition Health Services in the State included dietary and Nutritional Health Assessments, ameliorative measures, laboratory and field investigations, Nutrition Health education services and special activities are carried out through the three Regional Nutritional Health Service Units functioning at Guntur, Kurnool and Warangal. A Central Nutrition Services Laboratory is also functioning in the State Health Directorate.

The expanded Nutrition programme in Andhra Pradesh was implemented during the Third Five-Year Plan through the three-year operational period in 200 villages in 20 selected Panchayat Samithis and an approximate population of one lakh was benefited. This scheme in a more intensified form called as the applied Nutrition programme will be in operation for 3 consecutive years during the Fourth Plan period. 100 villages in 20 blocks were selected under the programme. Personnel of various categories like Project Officer, Health Officer, District Agriculture Officers, etc., were trained for this programme.

Health Education:

The State Health Education Bureau established in 1959 continued to do good work in helping the people to achieve health by their own efforts and action, assisting people to shoulder responsibility for their community health. It is educating the people on health matters by means of film shows, distribution of propaganda material and participation in exhibitions.

Transport Organisation:

A Transport organisation is functioning in the Public Health Department for attending to repairs and maintenance of vehicles of the Medical and Public Health Departments. There is a Static Workshop at Hyderabad which under takes major repairs.
and maintenance. Five Motor Vehicle Inspectors, one for each
of the five regions, undertake tours to inspect vehicles and direct
them to approved workshops for minor repairs. During the
year 1965 (up to the end of November) 1,068 vehicles were repaired
in the static workshop at Hyderabad.

Training Programme:

The key to extension of health services and the efficient
operation is the availability of trained personnel in all categories-

The scheme “Training of Auxiliary and Health Personnel” is
a plan scheme and envisaged provision for training of Health
Officers and other Public Health personnel in basic courses in
Public Health and studies of specialities in India and abroad.

During 1965-66 an amount of Rs. 51,000 has been provided
for deputation of 9 Health Officers for D.P.H., Course and 3
Public Health personnel for training in various Public Health
subjects abroad.

During 1966-67 an amount of Rs. 91,000 has been provided
to send 15 officers for training in D.P.H. course and for other
Public Health subjects in India and abroad.

A few Health Visitors are also being deputed every year for
Nurses Course training at State expense for appointment as Public
Health Nurse. This training programme is going to be intensified
in the Fourth plan.

In addition to the above, training courses of Health Visitors
and Auxiliary Nurse Midwives Health Inspectors of the arranged
regularly.

INDIAN MEDICINE DEPARTMENT.

All possible efforts are being made for the development of
Indian System of Medicine viz., Ayurvedic, Unani, Homoeopathic
and Naturopathy, under the administrative control of the Special
Officer, Indian Medicine Department.

2. There are 2 Government Colleges, one for Ayurveda and
another for Unani for imparting training in Sudha Ayurveda and
pure Unani, respectively. Teaching facilities for G.C.I.M. Course
have been provided to the students of Ayurveda and Unani
Colleges at Hyderabad. Besides this, training course for com-
pounders and Nursing Orderlies in Ayurveda and Unani have also
been started during the year 1965-66 to meet the demands of the
para-medical personnel during Fourth Five-Year Plan period. Apart
from the two Government Colleges mentioned above there are
three Ayurvedic Colleges, one Unani College at Kurnool and one
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Homoeo College and Hospital managed by private bodies. Financial aid is being given by Government to all the abovementioned private institutions except the Unani College, Kurnool.

3. There are 3 Government Ayurvedic Hospitals out of which, one is Unani Hospital and the other Homoeo Hospital in the State. The places where the said hospitals are located and their bed-strength are given below:

1. Government Ayurvedic Hospital,  
   Hyderabad. ... 148 beds.
2. Government Ayurvedic Hospital,  
   Warangal. ... 40 beds.
3. Government Ayurvedic Hospital,  
   Toopran. ... 4 beds.
4. Nizamia General Hospital, Hyderabad. ... 146 beds.
5. Government Homoeo Hospital,  
   Hyderabad. ... 10 beds.

Facilities for inpatients in Ophthalmology, Maternity and Child Welfare cases are also provided in the Nizamia General Hospital, Hyderabad. Besides this, a Dental Wing is also provided for out-patients.

4. There are 69 Ayurvedic, 77 Unani and 8 Homoeo Government dispensaries located in the Urban and Rural areas of the State. There are also more than about 1,000 subsidised, non-subsidised and regular rural dispensaries, under the management of the Zilla Parishads, Panchayat Samithies and Municipalities. In order to meet the growing medical needs of the Rural areas, it is proposed to open 13 new dispensaries of Ayurvedic, Unani and Homoeo in the year 1966-67 under Fourth Plan Programme.

5. With a view to encourage the Indian System of medicine, Grants-in-aid are being paid to the private institutions and dispensaries as before. Besides this, Honorarium at Rs. 30 p.m. and Rs. 20 p.m. for medicines is also being paid to the private medical practitioners who are practising the Indian system of Medicine in the rural areas, where no other medical facilities are available. For this purpose, a sum of Rs. 1,10,000 (including 50 Honorarium cases to be newly sanctioned for the next year) and proposed to be provided under the Non-Plan Budget for 1966-67. Apart from this, an amount of Rs. 80,000 is also proposed to be provided in the budget for 1966-67 for the payment of the ad-hoc grants to the private teaching and other institutions of Indian Medicine.
6. There are 646 subsidised Rural Dispensaries under the control of the Zilla Parishads and Panchayat Samithis. The question of sanctioning 175 new subsidised rural dispensaries is under consideration of the Government. Hence a sum of Rs. 17,47,100 is proposed to be provided in the budget for 1966-67 for payment of subsidies to the Rural Medical Practitioners and Maternity Assistant (including the proposed new 175 subsidised Rural Dispensaries) working in such subsidised rural dispensaries in the State.

PUBLIC HEALTH ENGINEERING DEPARTMENT.

The Public Health Engineering Department headed by a Chief Engineer with his Headquarters at Hyderabad comprises four Circles, viz., West Circle, East Circle, Special Circle and Regional Committee Works Circle, with their Headquarters at Hyderabad, Guntur, Visakhapatnam and Hyderabad respectively.

The Department deals with the Investigation, preparation of plans and estimates and execution of new Water Supply and Drainage Schemes. Improvements to the existing Water Supply and Drainage Systems in all Municipalities and also the Water Supply of Important Pilgrim Centres and Hill resorts.

The Major Water Supply Scheme now under execution is Thatipudi Reservoir Scheme for Visakhapatnam Water Supply Improvements estimated to cost Rs. 457 lakhs. This Scheme contemplates to augment the supply by 10000 lakhs Gallons per day to serve both the Municipal Population as well as the industries coming up in and around the town. This Scheme was commenced in 1961-62 and is expected to be completed by June 1966 to fulfill the commitment of water supply to Industries. The scheme envisages construction of a dam across River Gosthani near Thatipudi village and convey the water to the treatment plant at Krishnapuram. The filtered water will be pumped up to Uttarapally and then gravitated to the town. The construction of dam portion is entrusted to the Irrigation Department, while the remaining items are being executed by the Public Health Engineering Department.

During 1966-67, there is a provision of Rs. 285.00 lakhs for the execution of eleven spill-over schemes, i.e., 4 schemes in Andhra Region and 7 schemes in Telangana Region including Manjira Water Supply Scheme and Hyderabad Water Supply Improvements which are under the control of Public Works Department.

Out of the above eleven schemes, 2 schemes are proposed to be completed during 1966-67, i.e., Thatipudi Reservoir Scheme and Manjira Water Supply Scheme.
In addition to the above, this Department gives necessary technical advice to all the Municipalities in respect of maintenance of existing Water Supply and Drainage Schemes and also for the execution of works other than Water Supply and Drainage Schemes. This Department is also in charge of the implementation of Middle Income Group Housing Scheme (individual sector) in the Hyderabad city. For the present fresh loans are not being sanctioned under this scheme.

CHIEF ENGINEER (ROADS AND BUILDINGS).

Manjira Water Supply Scheme:

This scheme has been under execution by Public Works (Roads and Buildings) Department. The barrage is almost completed physically and in commission. The provision included in the 1966-67 Budget Estimate to the tune of Rs. 100.00 lakhs under the Fourth Five-Year Plan is intended to cover the anticipated outlay against the Revised estimate of Rs. 653.00 lakhs. The expenditure on this project will be in the order of Rs. 527.68 lakhs by the end of Third Five-Year Plan. The amount proposed for the next year is for laying pipe lines, manufacture of barrage gates, etc., and to complete the scheme in all respects. The expenditure will be charged against the plan allocation for the Urban Water Supply and Drainage Schemes. Soon after the completion of the Scheme it will be possible to meet the requirements of the Industries which are developing rapidly in Hyderabad and suburban areas and to cater to the needs of the increasing population. In addition to the above, the second phase has been proposed by raising the barrage for future, to meet the requirements of incoming industries and propose to be completed by end of Fourth Plan.

Hyderabad Water Works:

The Budget Estimate for 1966-67 for the Development of Hyderabad Water Works System proposes Rs. 19.00 lakhs and this outlay will be met out of the Plan allocation for the Hyderabad Water Works. The remodelling schemes proposed consist of schemes included in the Centrally sponsored schemes approved for Rs. 54.73 lakhs in G.O. Ms. No. 04, Municipal Administration dated 5th December 1959. In addition to the above State Plan Schemes are also included in the demand with a view to improve the existing water works system.

I have endeavoured to give brief resume to the Honourable Members the details of the various developmental programmes taken up by Medical and Public Health Departments. We have finalised the first year (1966-67) of the Fourth Five-Year Plan.
The Plan is a moderate one, having regard to the need for conserving finances for utilisation on emergency schemes. The Members are aware that due to the limited resources at our disposal, our achievements, though not spectacular, have kept up the tempo of the Medical and Public Health Programmes.

I now request the Honourable Members to kindly consider all the points dispassionately while assessing the work turned out by the Medical and Public Health Department.

Y. SIVARAMA PRASAD,
Minister for Health and Medical.
Appendix.

14th March 1966.

ప్రతి సంఖ్యలు డిసెంబర్ మే 30 న ప్రతి సంఖ్య ఐదు సంవత్సరాల నిలుపబడింది. ఐదు సంవత్సరాల ప్రారంభం సంవత్సరానికి అంతర్భాగం ప్రతి సంవత్సరము నిలుపబడింది. 1966 సంవత్సరం అనే సంవత్సరం నిలుపబడింది. మే 30 న ప్రతి సంవత్సరం నిలుపబడింది.
14th March 1966.

Appendix.

1,213 less 1,647 (404 less 1,043) is 2,277. The total expenditure for the year 1965-66 was Rs. 7,700. The net balance as on the 31st March, 1966, was Rs. 1,597.

In the event of any dispute, this order shall be final and binding.

1965-66 in 35 rupees one hundred rupees. The (uncertain) share of the school (including the school) is Rs. 1,650, and for the school, the school is Rs. 1,100. The amount of 1964-65, 1965-66 is Rs. 30.00 and Rs. 30.00.

As a result, the order of (uncertain) share of the school is Rs. 1,120 less than 1,250 at 1,200.

Thereafter, the order of (uncertain) share of the school is Rs. 1,000. The order of (uncertain) share of the school is Rs. 2,000.

Sincerely,

[Signature]

[Date]

[Name]
Appendix.

14th March 1966.

...
14th March 1966.

Appendix.

134

[Text continues in Telugu script, which cannot be accurately transcribed into English.]
Appendix. 14th March 1966.

<table>
<thead>
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| 1. రాశియన్ పిన్సల్ ప్రతి సంస్థ సంఖ్య | 461 | 215 |
| 2. సాహిత్య పిన్సల్ సంస్థ సంఖ్య | — | 84 |
| 3. రాశియన్ రామాయణ రమ్యశాఖ సంఖ్య | 79 | 80 |
| 4. స్ఫూర్తి సంస్థ | 2 | 50 |
| 5. హిందూ విద్యాధారి సంస్థ | 7 | 122 |
| 6. సాధారణ విద్యాధారి సంస్థ | 6 | 51 |
| 7. జంతు పాత్రాల సంస్థ (సాహిత్య ప్రత్యేక) | 11 | 298 |

| మిగిలిన సంస్థలు | 566 | 900 |


మార్చ 1966-67 లో ప్రదానం చేయబడిన పదార్థాలు ప్రత్యేకంగా వెలుగులు. ఈ పదార్థాలు ప్రదానం చేయబడిన పదార్థాలు ప్రత్యేకంగా వెలుగులు. 1966-67 లో ప్రదానం చేయబడిన పదార్థాలు ప్రత్యేకంగా వెలుగు ప్రదానం చేయబడింది. వెలుగు ప్రదానం చేయబడింది.
134  14th March 1966.

Appendix.

[Text content in a language that is not English, possibly Telugu or another South Asian language, with some characters not easily identifiable or readable due to quality of scan or resolution.]
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<th>విద్యా విడిది</th>
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</table>

సంఖ్య మాత్రములను మార్గదర్శించమని, మరియు ఎక్కడ వానిని (మంచి) కూతుక ఉండటం కారణం అని చెప్పండి—ఉచితం అయితే మాత్రములు కనుమలసి అయించండి.
1966-67 విదేశికాలు నియంత్రణ సంఖ్యలు రైతుల సంఖ్యలు

మ. 70 లో ఉండా, జనాభా మ. 40 లో ఉండా స్వామి సంఖ్య

ప్రత్యేకించిన నియంత్రణకారులను లేదా ప్రత్యేకంగా నియంత్రణకారులు

నాటికి ఉండి సంఖ్యలు రైతుల సంఖ్యలు

కేంద్రీకృతం లేదా, 1966-67 నియంత్రణ సంఖ్యలను మ. 107

సంఖ్య ఉంటే నియంత్రణ సంఖ్యలు నియంత్రణ సంఖ్యలు

ఈతన మ. 104.5 తో సంఖ్య ఉంటే ఉండటం అనేకం నియంత్రణ సంఖ్యలు

ఈ రేఖ నియంత్రణ సంఖ్యలు రైతుల సంఖ్యలు నియంత్రణ సంఖ్యలు

మ. 2.45 కో ఉండటం జరిగింది.

1966-67 విదేశిక మేలు ప్రత్యేకం పెంచిన ప్రత్యేక సంఖ్యలను మ. 3 లో ఉండటం

ప్రత్యేకం జరిగింది.

పాట నియంత్రణ ప్రాంతాలు నియంత్రణ ప్రాంతాలు

పాట నియంత్రణ ప్రాంతాలు నియంత్రణ ప్రాంతాలు

ప్రత్యేకం పెంచిన సంఖ్యలు నియంత్రణ ప్రాంతాలు

1966-68 విదేశికాలు నియంత్రణ ప్రాంతాలు

136 14th March 1966.

Appendix.
అంక 1. విభాగం
2. కళాకార
3. ప్రాంతం
4. పర్లాండ్
5. రాష్ట్రాల

అంక 2. విభాగం  
లేదా వ్యవస్థలం మాత్రమే అది ఆధారం లేదు కనుక అది ఒక వ్యవస్థ ప్రాంతం ఎంతో వుంటుంది. ఆధారం లేదా వ్యవస్థ ప్రాంతం అంటే విభాగం లేదా ప్రాంతం లేదా రాష్ట్రాల లేదా దేశాలు లేదా సామర్థ్యాలు. సామర్థ్యాలు ఆధారం లేదా వ్యవస్థ ప్రాంతం ఎంతో వుంటుంది. సామర్థ్యాలు ఆధారం లేదా వ్యవస్థ ప్రాంతం ఎంతో వుంటుంది. సామర్థ్యాలు ఆధారం లేదా వ్యవస్థ ప్రాంతం ఎంతో వుంటుంది.
14th March 1966.

Appendix.

The 14th Match 1966-67 saw the Bengaluru team
winning against the Aditya team by a score of 25-7. The Bengaluru team
was led by a strong performance from the batsman who scored a
Half Century. The Aditya team was led by the bowler who took
a wicket. The match was held on 14th March 1966-67.

The match was attended by a large audience of 5000, who
enjoyed the game. The match was refereed by a
famous referee.

The Bengaluru team was coached by a
distinguished coach, who
guided them to victory. The Aditya team was led by
a famous captain, who
guided them to defeat. The
team was led by a
distinguished coach, who
guided them to victory.
Appendix.  14th March 1966.  139

(i) क परस्पर बनकांकमायित्वात् गणित. आशंकाही विशेष मार्ग निर्देश
(कारण: चार्ट) गणित अभ्यास उपलब्धित रुपायें में हिस्सा दियाकरण करने के
संबंधी गणित मार्ग का प्रयोग, उक्त कारण के लिए गणित मार्ग का कुल प्रयोग
वर्तमान विस्तार के प्रयोग को एक वर्तमान गणित मार्ग के रूप में बनाने के
संबंधी।

(ii) क विशेषता चार्ट (जिन्हें) मार्ग प्रमाणण विशेष
(कारण: कारण) गणित अभ्यास उपलब्धित रुपायें में हिस्सा दियाकरण करने के
संबंधी गणित मार्ग का प्रयोग, उक्त कारण के लिए गणित मार्ग का कुल प्रयोग
वर्तमान विस्तार के प्रयोग को एक वर्तमान गणित मार्ग के रूप में बनाने के
संबंधी।

क 1957 के चार्ट (जिन्हें) मार्ग प्रमाणण विशेष
(कारण: कारण) गणित अभ्यास उपलब्धित रुपायें में हिस्सा दियाकरण करने के
संबंधी गणित मार्ग का प्रयोग, उक्त कारण के लिए गणित मार्ग का कुल प्रयोग
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संबंधी।

का विशेषता विशेष (जिन्हें) मार्ग प्रमाणण विशेष
(कारण: कारण) गणित अभ्यास उपलब्धित रुपायें में हिस्सा दियाकरण करने के
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संबंधी।

का विशेषता विशेष (जिन्हें) मार्ग प्रमाणण विशेष
(कारण: कारण) गणित अभ्यास उपलब्धित रुपायें में हिस्सा दियाकरण करने के
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वर्तमान विस्तार के प्रयोग को एक वर्तमान गणित मार्ग के रूप में बनाने के
संबंधी।
140 14th March 1966.  

Appendix-

ప్రపంచ జాతీయ చర్చల్ డీమెణ్ట్లో ఒక సంఖ్య 1965-66 లో సమాధానం చేసింది. ఒక్కసారి 69 సంఖ్యలు ఉండి, రాష్ట్రాలు సమాధానం చేసింది. 92 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 81 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 500 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. వాన సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 243 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 12 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది.

సేవులు తెలుగు సాంస్కృతిక సాధనాలు ఉండే ఉపయోగానికి యొక్క సమాధానం చేసింది. సేవ సాధనాలు వాస్తవానికి యొక్క సమాధానం చేసింది. సూచించిన సాధనాలు చేసింది. రాష్ట్రాలు చేసింది. 11 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 10 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది. 7 సంఖ్యలు ఉండి, అవి సంఖ్యలు యొక్క సమాధానం చేసింది.

అక్షరాల దూరం ముందు దృశ్యంగా ఉండి, ఆంగ్ల భాష ఉండి, ఇంగ్లీషు యొక్క సమాధానం చేసింది. 1965 లో సంచారం చేయబడింది. మాత్రమే యొక్క సమాధానం చేసింది. 1965, వాన సంఖ్యలు యొక్క సమాధానం చేసింది. 30 సంఖ్యలు యొక్క సమాధానం చేసింది.
అంకెలనౌత్స్తు, లాంటి విశ్లేషణ సంఖ్యా 206, 1966-67 నుండి 50,000 రూపాణి కలిగేదు, 46,000 రూపాణి ప్రభుత్వంలో మరియు 131,000 రూపాణి లాంటి విశ్లేషణ 15,000 రూపాణి ప్రతి కాలం భాగంగా ఉండాలి. అంతటితే ఎంచుగా, కాలం భాగం విశ్లేషణ ఉంటుంది, ఇది నిబంధన వితరణ నిర్ణయం నుండి విశ్లేషణ ఉంటుంది. యాచిత్వం మూడు సంచాలక భాగానికి కలిగిన 650 రూపాణి జాగ్రత్త నిర్ణయం ఉంది.

(1) అంకెలనౌత్స్తు ప్రతి విషయాన నిర్ణయం ఉంది. పరిస్థితుల పై ఉండి అనుమతి పాటు వేసిన కాలం భాగం ఉంది.

(2) చాలాంతి ప్రతి విషయాన కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది. చాలాంటి విషయాన ఉంటుంది.

(3) చాలాంతి ప్రతి విషయాన నిర్ణయం ఉంది. చాలాంతి విషయాన కాలం భాగం ఉంటుంది.

(4) కాలం భాగం కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది.

(5) కాలం భాగం కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది. గ్రూప్ హెడ్ ప్రాంతం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది.

(6) కాలం భాగం కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది. కాలం భాగం కాలం భాగం ఉంటుంది.

ఎందుకు మరింత సత్యాలను కూడా పిలిచే మనకు విశ్లేషించిన ఇందులో అంతర్గత విశ్లేషించిన మనం పిని పిని స్థాపించాలి.
1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక కార్మికత కలయం, సంయుక్త జిల్లా కార్మికత ఎంపికత ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక కార్మికత కలయం ఉంది.

ఇంత కార్మికత ప్రత్యేకంగా ఎంపికత కలయం, సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక యోగేష్టి ఉంది.

ఇంత కార్మికత ప్రత్యేకంగా ఎంపికత కలయం, సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక యోగేష్టి ఉంది.

ఇంత కార్మికత ప్రత్యేకంగా ఎంపికత కలయం, సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక యోగేష్టి ఉంది.

ఇంత కార్మికత ప్రత్యేకంగా ఎంపికత కలయం, సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక యోగేష్టి ఉంది.

ఇంత కార్మికత ప్రత్యేకంగా ఎంపికత కలయం, సంయుక్త జిల్లా ప్రత్యేక యోగేష్టి ఉంటే కర్మదర్శి నియోగప్రకారం 1964–65 పంతుల కాలంలో అభివృద్ధి ప్రత్యేక యోగేష్టి ఉంది.
Appendix.

14th March 1966.

1966 ರಿಗಿಗೆ ಸ್ವಾಮಿ ಮಹಾವಿಷ್ಣು ಕಾರ್ಮಣಿಯರು ಮತ್ತು ಶಿಖರಿಗೆ ಅವಶೆಯರು, ದೇವರಿಗೆ ದೇವುಪಾಲರು 8 ತಾಂತ್ರಿಕರು ಮೇಲೆ ಸ್ವಾಮಿಯಾ ಮತ್ತು ದೇವರಿಗೆಯ ಮೇಲೆ 4 ತಾಂತ್ರಿಕರು. ದೇವರಿಗೆ 50 ಮೊದಲು 100 ಅದರ ಅಂಕವನ್ನು ಪ್ರಧಾನ ತಾಂತ್ರಿಕರಿಗೆ ವಿವರಿಸಿದರು ಮತ್ತು ರೈತಾಗಿದ್ದಾರು. 1966 ರಿಗಿಗೆ ತಾಂತ್ರಿಕ ರೈತಾಗಿದ್ದಾರು 50 ಮೊದಲು 100 ಅದರ ಅಂಕವನ್ನು പ್ರಧಾನ ತಾಂತ್ರಿಕರಿಗೆ ವಿವರಿಸಿದರು ಮತ್ತು ರೈತಾಗಿದ್ದಾರು.

1965-66 ರಿಗಿಗೆ ಸ್ವಾಮಿ ಮಹಾವಿಷ್ಣು ಸಮುದಾಯದ ಮೇಲೆ ತಾಂತ್ರಿಕರು 25 ಮೊದಲು 100 ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ ಮತ್ತು ನುಡಿಯಾಣ ಮತ್ತು ಮರಣತಿಗೆ ಸೇರಿದರು. 1965-66 ರಿಗಿಗೆ ತಾಂತ್ರಿಕರು 105 ಮೊದಲು 100 ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ ಮತ್ತು 100ಕಂಬ ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ ಮತ್ತು ಮರಣತಿಗೆ ಸೇರಿದರು. 1965-66 ರಿಗಿಗೆ ತಾಂತ್ರಿಕರು 105 ಮೊದಲು 100 ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ. 1965-66 ರಿಗಿಗೆ ತಾಂತ್ರಿಕರು 105 ಮೊದಲು 100 ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ. 1965-66 ರಿಗಿಗೆ ತಾಂತ್ರಿಕರು 105 ಮೊದಲು 100 ಮರಣತಿಗೆ ಕಾರಣಾತ್ಮಕವಾಗಿ.
(i) 1965-66

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Total: 375

(ii) 1966-67

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<td>7</td>
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</tr>
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Total: 420
(iii) రాళ్ల రెండు వర్షాలు:

స్పష్టంగా లభించిన లిఫ్టింగ్ భూమిలో రాళ్ల రెండు వర్షాలు సరమ‌ానంగా ఉండేవి. ఇక్కడ నిష్పుధంగా లిఫ్టింగ్ రెండు వర్షాలు సరమ‌ానంగా ఉండాలి. ఇందులో నిష్పుధంగా ప్రగటి మేలు ఉండాలి.

(1) హిస్ట్రి వర్షాలు ప్యాగ్రిట్ 20 మిట్టి ఉంటుంది.
(2) మిస్టర్ వర్షాలు ప్యాగ్రిట్ 14 మిట్టి ఉంటుంది.
(3) స్కు వర్షాలు ప్యాగ్రిట్ 30 మిట్టి ఉంటుంది.
(4) మిస్టర్ వర్షాలు ప్యాగ్రిట్ 30 మిట్టి ఉంటుంది.
(5) స్కు వర్షాలు ప్యాగ్రిట్ 30 మిట్టి ఉంటుంది.

(6) లిఫ్టింగ్ చరిత్ర లిఫ్టింగ్ రెండు వర్షాలు ప్యాగ్రిట్ 12 మిట్టి ఉంటుంది.

(7) లిఫ్టింగ్ చరిత్ర లిఫ్టింగ్ రెండు వర్షాలు ప్యాగ్రిట్ 18 మిట్టి ఉంటుంది అయితే, కాలం చరిత్ర రెండు వర్షాలు ప్యాగ్రిట్ 10 మిట్టి ఉంటుంది.

(8) దిగ్గజు రెండు వర్షాలు ప్యాగ్రిట్ 10 మిట్టి ఉంటుంది.

(9) లిఫ్టింగ్ విద్యా ప్రారంభం అయితే 50 మిట్టి ఉంటుంది.

ఆరోపిత విభాగాల కార్యాల అనుమతి ఉంటుంది, కాలం చరిత్ర రెండు వర్షాలు 35 మిట్టి ఉంటుంది. ఈ కాలంలో లిఫ్టింగ్ రెండు వర్షాలు ప్యాగ్రిట్ 220 మిట్టి ఉంటుంది.

(iv) సంశయానుసారం వ్యక్తి లక్షణాలు ఉండవచ్చు లిఫ్టింగ్ రెండు వర్షాలు ప్యాగ్రిట్.

సమాధానం లిఫ్టింగ్ లేదు (మాత్రమే లిఫ్టింగ్) ప్రారంభం 11 మిట్టి ఉంటుంది. ఇది వ్యక్తి లక్షణాలు ప్యాగ్రిట్ రెండు వర్షాలు ప్యాగ్రిట్.

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Appendix.

14th March 1966.

...
Appendix.

14th March 1966.

1966-67 శాసనసభ సంబంధితంగా ఇది ముద్రించబడింది. ముద్రించనా తరువాత ఈ సంస్థ సంబంధిత సమాచారం తెలించింది.

1966-67 యొక్క 4 హెక్టార్ల పెంచడానికి మరో తోడ్డి కనిపించబడింది. అందుకే ఈ సంస్థ మద్దతు చేసిన ఒక సంహరిత వైద్య సంస్థ యొక్క ప్రతి 100 హెక్టార్ల పెంచడి నిషేధం నిషేధం కావాలి. ఈ సంస్థ నిషేదం నిషేదం కావాలి.

1966-67 యొక్క పరిశీలన సంస్థ ప్రతి 50 హెక్టార్ల పెంచడి వైద్య సంస్థ నిషేదం.

పాటు నుండి అలాంటి పంపులు వేడుకలు చేసారు.

1966-67 యొక్క పరిశీలన సంస్థ ప్రతి 60 హెక్టార్ల పెంచడి వైద్య సంస్థ నిషేదం.

పాటు నుండి అలాంటి పంపులు వేడుకలు చేసారు.
1965–66 వ సంవత్సరం లో మరింత తక్కువ రాబిలు మార్పులు మాత్రమే చేయబడింది. మాత్రమే మాట్లాడింది సంపాదక సంస్థ. ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యం గా వచ్చింది.

1966–67 వ సంవత్సరం లో మరింత కొండలు చేయబడిన సంపాదక సంస్థ సాధారణంగా ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యంగా వచ్చింది.

1965–66 వ సంవత్సరంలో 15 వ పాఠసంస్థ సాధారణంగా ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యంగా వచ్చింది.

1966–67 వ సంవత్సరంలో 20 వ పాఠసంస్థ సాధారణంగా ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యంగా వచ్చింది.

1. మాట్లాడం వలన తన మనం సంపాదక సంస్థ సాధారణంగా ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యంగా వచ్చింది.

2. మాట్లాడం వలన తన మనం సంపాదక సంస్థ సాధారణంగా ప్రపంచవ్యాప్తంగా మనం సంపాదక సంస్థ ప్రపంచోభాగంలో మెచ్చడం సాధ్యంగా వచ్చింది.
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3. अग्नि प्रीति वायुद्रु 50 वर्षां अंतर 50% घटायले गयी व अग्नि प्रीति वायुद्रु 250 वर्षां 50% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव 50% व 250 वर्षां 50% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव.

4. अग्नि प्रीति वायुद्रु विविध अब्ज्ञे अग्नि प्रीति वायुद्रु 250 वर्षां 75% घटायले गयी व अग्नि प्रीति वायुद्रु 75% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव.

1966-67 दीस वर्षां अंतर 50% घटायले गयी व अग्नि प्रीति वायुद्रु 75% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव.

मात्र अग्नि प्रीति वायुद्रु 250 वर्षां 75% घटायले गयी व अग्नि प्रीति वायुद्रु 75% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव.

मात्र अग्नि प्रीति वायुद्रु 250 वर्षां 75% घटायले गयी व अग्नि प्रीति वायुद्रु 75% घटायले गयी व अग्नि प्रीति वायुद्रु आज्ञा येते हेव.

लेखनीय

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మారు విలువ ప్రతిక్రియ చేయడానికి:

మేండు వారికి అవతరణానికి చాలా తెలియింది కావచ్చు. కానీ నేటికి ప్రతిబింబి వారి విలువలు ప్రఖ్యాతం చేయలేదు.

1966-67 సంవత్సరానికి ఆంధ్రప్రదేశ్ లో మత్తు విలువలు ప్రతి విలువలు ప్రదానం చేయబడినది.

14వ మార్చి 1966.
2. అందంగా ఖరీదు కంప్యూటర్ ప్రయోగాలు సాధనాలను తెలియండి జరిగిన సంచాలను నిర్ధారించండి.

3. సంమానాను కొనసాగండి. కొంతా కూడా సమయం సాధించకుండా స్థాయిస్తే జరిగింది.

భారత సిమిలరెడిస్ (ఇంటియం) 1966-67 యు సమయంలో మ. 0.35 ద్వారా అలంకారం చేయబడింది.

శేషం రైతు రాశి సమాచారం

విశేషాత్మక తరువాత విశేషాత్మక రైతు ప్రయత్నం చేసిన విభుద్ధ తరువాత ఉండాడాను, క కర్మచారు బాలసముద్రం, రామాయణ నిపుణుడు

1966-67 సంవత్సరం ద్వారా మ. 45,000 యు రాశి సాధించబడింది.

సాధారణ విశేషాత్మకం

సమయం 1966-67 సంవత్సరం ద్వారా మ. 16.65 యు రాశి సాధించబడింది.

సమయం 1966-67 సంవత్సరం ద్వారా మ. 10 యు రాశి సాధించబడింది.
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1966-67 թี่սը ապրելուն հաշմանդամ է երկուսը մասնակցել կանգնածության հանդերձ։ Ֆինանսավորում (ագիություն, հատկապես), առաջին քարտեզ վճարելուն կարո՞ր, բայց իր հատկությունը, թափ վաճառելով, կայք տեղափոխելուն հանձնարարեն տեղում։ Ուրիշ տուների ու մարզեր, արև, այստեղ պահպանելուն երկրների համար, նրանցից առաջ, հաստատվելուն զանգակացելուն կատեգորիաներ (առաջ և տարեկան) գործառույթներ 1966-67 թ. կառավարական սենյակ հարկավոր համար։ 1966-67 թ. ներկայացուցակի վնասական ծառայություն, անձնական թիվը 100 000 ս. 21,793,500 գ. մեծությամբ կենտրոնակցում։

Այստեղ, հանրություն հարկավորական, այստեղ, հանրություն կանգնած մասնակցության համար։

Այստեղ, չեզոքով տարածաշրջանի անձնական համար, այստեղ ենթատեղի վճարելուն կարո՞ր, ինչն հատկացնելուն կարո՞ր, այստեղ երկրի համար անձնական համար, կազմակերպման համար։ Այստեղ, հարկավոր սենյակացուցակ մահացելուն կարո՞ր, էլիմինացիան հարկավոր համար։

Այստեղ, հանրություն կանգնած մասնակցության համար,

մահացելուն կարո՞ր, հանրություն կանգնած մասնակցության համար։ Այստեղ, հանրություն մահացելու 218 քարո՞ր

1. Բերեք շտոտագնություն մասնակցության արարողություն կապակցում բ. թ. ն. նախագահ։

2. Սենյակացուցակի վճարելուն կարո՞ր, հանրություն կանգնած մասնակցության համար։

3. Սենյակացուցակի, երեսշարժերի պատկանություն կարո՞ր, հանրություն կանգնած մասնակցության համար։

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4. 18 ప్రతిష్ఠలు మాగులు పిలువడంలో మోతాడి నిర్దిష్టమైన కల్పన నియంత్రణ ప్రమాదం కలిగి ఉండాలి. 18 ప్రతిష్ఠలు ప్రతి విశేషమైన భాగం ప్రియతమ మాధ్యమాలలో నిర్ణయించాయి. అలాగే ప్రతి ప్రతిష్ఠలు ప్రతి విధంగా యోక్షమం నిషడితుందాయి. అలాగే ప్రతిష్ఠలు ప్రతి విదేశానికి రక్షణప్రకారం నిషడితుందాయి.

5. పారసిట్ల సమయం 4 సంవత్సరాలు పారసిట్ల అనిస్సం అంటే

6. 1965-66 సంవత్సరం అతి ప్రామాణిక సంఖ్యలు ప్రతి విశేషమైన

ప్రస్తుతం వివిధ ప్రాంతాలలో ఈ పారసిట్ల అంటే

1965-66 సంవత్సరం నిర్ధారణాలు 23 సంవత్సరం నిర్ధారించాయి

12 సంవత్సరం ప్రతి సంవత్సరం నిర్ధారించాయి. 21 సంవత్సరం ప్రతి సంవత్సరం నిర్ధారించాయి

లేదా ప్రతి ప్రాంతం ఉన్నతం ఉంది.

1964-65 సంవత్సరం నిర్ధారణాలు 16 సంవత్సరం పతనం ఆరంభించాయి. 1965-66 సంవత్సరం నిర్ధారణాలు 21 సంవత్సరం ప్రతి సమయం నిర్ధారించాయి

ప్రతి ప్రాంతం ఉన్నతం ఉంది.

ప్రతి ప్రాంతం నిర్ధారణాలు 1965-66 సంవత్సరం నిర్ధారణాల ప్రతి సమయం నిర్ధారించాయి

1965-66 సంవత్సరం నిర్ధారణాలు 71 సంవత్సరం ప్రతి సమయం నిర్ధారించాయి.
అధికారిక వివరణలు:

ఆరంభం నందిఖండ సరిహద్దు, సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు 

మంచి నందికోసం లభిసినంత పరిస్థితిలో, సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు సరిహద్దు 

హైదరాబాద్, సీతారామాప్రధాన్ స్వభావంతో, దినమందిరం విస్తారం ప్రతిపాదించాడని చెప్పింది. సరిహద్దు 

అధికారిక వివరణలు,

1959 అవసరము నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు 

వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు 

వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు 

వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు 

వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు నందికోసం వారు 

వారు అధికారిక వివరణలు నందికోసం వారు అధికారిక వివరణలు 

వారు అధికారిక వివరణలు నందికోసం వారు 

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రెండు సంయుక్త సయాంతర కంగ్రెస్ లో ఉన్ని శాసనాలు, జాతించబడింది. జన్మ ప్రాంతాలలో ఉన్ని ప్రాంతాలు పనిచేసే లేదా ఉన్ని ప్రతి రిటెస్ట్రేషన్లు ఉండజేసే ఆంతర్భాగాలు అంచనా అవకాశం ఉంది. 1965 ఎన్నిక నియమాలు ఉండాలని అధ్యక్షులు తెలిపింది. 1968 సంవత్సరంలో రిటెస్ట్రేషన్ మార్కాలు అడవించబడింది.

ప్రపంచ మనుస్సరికి సహా చెప్పాలనుకుంటే, పలు సంస్థలు సహాయం చేసే విధానాలు ఉన్నట్టు ప్రతి ప్రతి జాతించబడింది. 1068 సంవత్సరంలో రిటెస్ట్రేషన్ మార్కాలు పొలాలు కలిగి ఉండాలి.

ప్రపంచ మనుస్సరికి సహా చెప్పాలనుకుంటే అధ్యక్షులు తెలిపింది. 1965 మందిస్తాను మార్కాలు ఉన్నట్టు ప్రతి ప్రతి జాతించబడింది. 1068 సంవత్సరంలో రిటెస్ట్రేషన్ మార్కాలు పొలాలు కలిగి ఉండాలి.
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2. ప్రామాణిక సంప్రదాయ సమాధానానికి అంకీలనిలితుల తోడ్డి అర్థం లేదు. ఇది రెండు సంస్మరణముల వల్ల ఇది ఉపయోగించాలి. (ఇది నాటి కాలంలో ఉపయోగించాలి.)

3. ప్రామాణిక సంప్రదాయ సమాధానానికి అంకీలనిలితుల తోడ్డి అర్థం లేదు. ఇది రెండు సంస్మరణముల వల్ల ఇది ఉపయోగించాలి. (ఇది నాటి కాలంలో ఉపయోగించాలి.)

(1) విశేష విచారణ విశేష మరింతం ... 148 లక్షలు
(2) విశేష విచారణ విశేష మరింతం ... 40 ''
(3) విశేష విచారణ విశేష మరింతం ... 146 ''
(4) విశేష విచారణ విశేష మరింతం ... 10 ''

ప్రామాణిక సంప్రదాయ సమాధానానికి అంకీలనిలితుల తోడ్డి అర్థం లేదు. ఇది రెండు సంస్మరణముల వల్ల ఇది ఉపయోగించాలి. (ఇది నాటి కాలంలో ఉపయోగించాలి.)

ప్రామాణిక సంప్రదాయ సమాధానానికి అంకీలనిలితుల తోడ్డి అర్థం లేదు. ఇది రెండు సంస్మరణముల వల్ల ఇది ఉపయోగించాలి. (ఇది నాటి కాలంలో ఉపయోగించాలి.)
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4. అత్యంత పొందిన దినంత్రం దేవత శాసనం 69 అక్షరాలు, 77 లేదా 8 లేదా రెండు వర్ణాలు చాలాగా లేదా దినంత్రం దేవత శాసనం కూడా అందించాయని, కావిరచనలు, అందరాలు రెండు వర్షాల క్రితం రెండు 1000 కోట్ల విలువ కాలంలో కనిపించాయని. ఆంధ్రప్రదేశ్ సర్వస్వం జానింది సేవ శాసనం ప్రమాద నియంత్రణ అందించిన డిసెంబరు 1966-67 గా చాలాగా యోగ్యం అయితే సంపాదించిన ప్రతి సందర్భం నిర్ణయం చేసిన తరువాత 13 ప్రతి జానింది శాసనం అందించాయని.

5. అత్యంత పొందిన దేవత శాసనం దేవత శాసనం 127 అక్షరాలు, 87్లేదా 8 లేదా రెండు వర్ణాలు చాలాగా లేదా దేవత శాసనం కూడా అందించాయని, కావిరచనలు, అందరాలు రెండు వర్షాల క్రితం రెండు 1000 కోట్ల విలువ కాలంలో కనిపించాయని. ఆంధ్రప్రదేశ్ సర్వస్వం జానింది సేవ శాసనం ప్రమాద నియంత్రణ అందించిన డిసెంబరు 1966-67 గా చాలాగా యోగ్యం అయితే సంపాదించిన ప్రతి సందర్భం నిర్ణయం చేసిన తరువాత 13 ప్రతి జానింది శాసనం అందించాయని.

1,10,000 అక్షరాలు 1966-67 సర్వస్వం ప్రాంతాలు అందించాయని. అడిషాని ప్రెస్మాని దినంత్రం యొక్క అంశాంగ్రహాలు అందించిన ప్రతి సందర్భం నిర్ణయం చేసిన తరువాత 1966-67 సంవత్సరం యొక్క 80,000 అక్షరాల ప్రెస్మాని దినంత్రం యొక్క అంశాంగ్రహాలు అందించాయని.
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(అధయాయము) అమలిక రామ

ముఖద్వారం అభివృద్ధి రామను బిగిగా అనుమతించారు. మరియు విశిష్టత్వంగా ప్రపంచవ్యాప్తంగా ప్రస్తృతమైంది. తాను 4 నియంత్రణ ప్రధానం. ఏమీసిన్ ప్రధానం సోంకరం, కార్యాలయం, పహిల్లు ఉపయోగిస్తారు. ఇది దేశంలోని గార్థం, ప్రతిష్ఠ, సాధారణ, అభివృద్ధి ప్రామాణిక ప్రధానాలతో పాటు ఇది కాంప్లాస్ట్ ది కంప్యూటర్ పరిస్థితి నుండి లభించిన పదార్థాలను సంశోధించారు, కాగా ఇది సంపన్న పదార్థం పై నిలబడడానికి ప్రయత్నించారు అంటే ఒక ప్రామాణిక పరిస్థితి లేదు.

విదేశం, ప్రపంచ ప్రతిష్ఠ, పంచదశాఖ ప్రామాణిక ప్రధానాలతో విశేషాలు సంపన్న పదార్థం పై నిలబడడానికి ప్రయత్నించారు అంటే ఒక ప్రామాణిక పరిస్థితి లేదు. 1961-62 సంవత్సరాలపై ఏ 1966 రోజు నాటి నిర్ధారణలూ అనుభవించారు. ఏమీసిన్ ప్రధానం సోంకరం, కార్యాలయం, పహిల్లు ఉపయోగిస్తారు. ఈ ప్రాంభిక పదార్థం పరిస్థితి నుండి లభించిన పదార్థాలను సంశోధించారు, కాగా ఇది సంపన్న పదార్థం పై నిలబడడానికి ప్రయత్నించారు. అంటే ఈ పదార్థం పై నిలబడడానికి ప్రయత్నించారు. మరింత పదార్థాలు ఈ పదార్థాలు ఉపయోగించారు. మరింత పదార్థాలు ఈ పదార్థాలు ఉపయోగించారు. 1966-67 సంవత్సరం అంటే ఈ పదార్థం ఉపయోగించారు. ఈ పదార్థం నిర్ధారణలూ అనుభవించారు. విదేశం ప్రతిష్ఠ, పంచదశాఖ ప్రామాణిక పదార్థాలు సోంకరం, కార్యాలయం, పహిల్లు పై నిలబడడానికి ప్రయత్నించారు. అంటే ఈ పదార్థం ఉపయోగించారు.
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నీడ ఎంతం అందంలో రాకుండా మార్గ కొరకు చెప్పించండి, మొత్తం విద్యార్థి మార్గం 1966-67 నియంత్రణ సంఖ్య గానీ లేకుంటే 1966 సంపన్న పద్ధతి లో అందవేత లేదు.

రాహులు, మామలు విద్యార్థి నిర్ణయానికి:

మనం నిర్నయించిన నిర్ణయం (ప్రతి, కోటాలు) రాతా మాసం

మర్యాదానికి. యువరాష్ట్ర నిర్వహణ పరిషత్తు ప్రతి పాఠశాలలో రూ. 100-00 కే రెండు రు 1966-67 మాసం

లో అందంలో ఉన్ని ఉద్యోగాలు ప్రతి పాఠశాలలో రూ. 507.68

రూ. 653-00 కాదు. ముఖ్య యోధా నిర్ణయం చేయడానికి మనం ఏర్పాటు చేసి, రూ. 507.68

మనం నిర్నయించిన నిర్ణయం చేయడానికి మనం ఏర్పాటు చేసి, రూ. 653-00 కాదు. మనం నిర్నయించిన నిర్ణయం చేయడానికి మనం ఏర్పాటు చేసి, రూ. 653-00 కాదు. మనం నిర్నయించిన నిర్ణయం చేయడానికి మనం ఏర్పాటు చేసి, రూ. 653-00 కాదు.
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ప్రధానంగా స్థానం అందులో ఉన్నపోవడాన్ని జారుగలు ప్రకారం 1966-67 సంవత్సరం లో రూ. 10.00 కి ఉంటుంది. 
ప్రత్యేకంగా తేది లేదా అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా ప్రత్యేకంగా మరియు అదనకుండా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా 

5-12-1959 నా స్థానాభివృద్ధి ప్రత్యేకంగా లేదా రూ. 94 కి.మ. ఈ రూ. 54.73 కి ఉంటుంది, ఇది స్థానాభివృద్ధి ప్రత్యేకంగా భాగంగా లేదా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా భాగంగా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా 

యుద్ధం సవేస్తూ చెందా తీర్యక వాడతా పని ఆభరణం వాడి తరువాత కమ్మను లేదా మేషానికి ప్రత్యేకంగా భాగంగా లేదా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా భాగంగా 

(1966-67) గాంధీవారిని చెన్నాగల నాగారం ప్రత్యేకంగా భాగంగా వాటికి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా భాగంగా వాటి చెందా తీర్యక వాడతా పని ఆభరణం వాడి 

సంస్కృతి, శాస్త్ర జాబితా కిందుసూర్తులు మేధావికి 

ఎత్తు అందంగా లేదా అదనకుండా వాటి కుటుంబం చేయడానికి జరిగిన ప్రత్యేకంగా భాగంగా వాటికి కుటుంబం చేయడానికి జరిగిన 

III. బాబు సోదరు, 

ఎత్తు మహాధరు రామ మహేంద్ర.