

(English Version)



FORM NO.- 7 / 8

GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
TALCHER MUNICIPALITY

CERTIFICATE OF BIRTH

Issued under section 12(1) of the Registration of Births and Deaths Act, 1969 and rules of Odisha

Births and Deaths, Rule 2001.

This is to certify that the following information has been taken from the original record of birth which is in the register for **TALCHER MUNICIPALITY** of Tahasil **TALCHER**

of District **ANGUL** of State of **ODISHA**

Date of Birth **21/02/2017**

Permanent Address **KARNAPUR, KARNAPUR,**

Sex **MALE**

VIKRAMPUR, ANGUL, ODISHA, INDIA

Name **RUDRA NARAYAN BISWAL**

Name of Father **SUBRAT BISWAL**

Place of Birth **JENA AND JENA NURSINGHOME,**

Name of Mother **NARMADA BISWAL**

TALCHER

Date Of Registration **27/02/2017**

Registration No. **236/2017**



REGISTRAR

BIRTHS & DEATHS
Signature of Issuing Authority
Registrar

Births & Deaths

TALCHER MUNICIPALITY

Date :

21/12/2017