

(English Version)

FORM NO. - 7 / 8



GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
BHUBANESWAR MUNICIPAL CORPORATION
CERTIFICATE OF BIRTH

NO. 28234PHNS
dt. 19-9-19

Issued under section 12/17 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 **Bhubaneswar Municipal Corporation**

of District **KHORDHA** of State of **ODISHA** of Tahasil **BHUBANESWAR**

Date of Birth **18/08/2019**

Permanent Address **AT/PO-KAMARASAHU**

Sex **FEMALE**

PS-DASAPALLA, NAYAGARH, ODISHA, INDIA

Name **PRIVADARSHINI PATRA**

Name of Father **SURESHAN PATRA**

Place of Birth **AROGYAM NURSING HOME,**

Name of Mother **PRAMODINI PATRA**

BHUBANESWAR

Date Of Registration **02/09/2019**

Registration No. **18228/2019**



Signature valid

Digitally signed by
BASANKA KUMAR MISHRA
Date: 2019.09.19 15:05:07
IST
Reason: BIRTH Application
Location: BHUBANESWAR

Note: It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature.
This certificate is issued as per section 4, 5 & 6 of Information Technology Act 2000 and its subsequent amendments in 2008. For any query, please visit <https://www.albodisha.gov.in>. Tampering of this certificate will attract penal action.

Date

16/09/2019