

(English Version) -

FORM NO. -7/8



21656
NO.....PH/VS,dt. 28/9/13

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

CERTIFICATE OF BIRTH

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 Tahasil **BHUBANESWAR**
of District **KHURDA** of State of **ODISHA**

Date of Birth..... **05/08/2012**

Permanent Address..... **AT/PO-ALIKANTA,**

Sex..... **MALE**

VIA/PS-BALIKUDA, JAGATSINGHPUR, ODISHA,

Name..... **SUBEER MOHARANA**

INDIA

Name of Father..... **SARAT CHANDRA MOHARANA**

Place of Birth..... **ANNAPURNA MEMORIAL HOSPITAL,**

Name of Mother..... **RUPA MOHARANA**

BHUBANESWAR

Date Of Registration..... **18/08/2012**

Registration No..... **16710/2012**

Date **14/08/2013**


Signature of Issuing Authority
Registrar
Births & Deaths
BHUBANESWAR MUNICIPAL CORPORATION