

FORM NO-7/8 ISSUE NO: 1925/2022



GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE

GODIBANDHA CHC

CERTIFICATE OF BIRTH

Issued maler 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 following information has been taken from the original records of birth which is in the register for GODIBANDHA CHC of Tahasil TALCHER of District ANGUL of State ODISHA

NAME: SHREYANSH SAHOO

SEX: MALE

DATE OF BIRTH: 16/01/2021 PLACE OF BIRTH: SUBHALAXMI NURSING HOME, GODIBANDHA, ANGUL

NAME OF MOTHER: SUCHITRA SAHOO NAME OF FATHER: SUSANTA SAHOO

MOTHER'S ID PROOF NO:

FATHER'S ID PROOF NO:

ADDRESS OF PARENT AT THE TIME OF CHILD BIRTH:GHANTAPADA, GHANTAPADA, COLLIERY, ANGUL, ODISHA, INDIA PERMANENT ADDRESS OF PARENTS: GHANTAPADA, GHANTAPADA, COLLIERY, ANGUL, ODISHA, INDIA

REGISTRATION NO: 89/2021

REGISTRATION DATE: 20/01/2021

UBRN NO: 21RB344-0113-000088/2021 DATE OF ISSUE: 03/09/2022



Signature valid

Digitally signed by
SATYAPPINA SA IBIT
Date: 2022 DBO 12:58:33 IST
Reason: Birth y ertificate
Location: GOD/BANDHA

Dr Satyapriya Sambit Issuing Authority Registrar, Births & Deaths GODIBANDHA CHC

THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FASCIMILE SIGNATURE OF THE ISSUING AUTHORITY.

It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature, stamp or seal. This certificate is issued as per section 4,5 & 6 of information technology Act 2000 and it's subsequent amendments in 2008. For any query or verification, please visit https://www.birthdeath.odisha.gov.in Tampering of this certificate will attract penal action.