

(English Version)

FORM NO.- 7 / 8



# GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE  
ANGUL MUNICIPALITY

## 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 Angul Municipality of Tahasil ANGUL  
of District ANGUL of State of ODISHA

Date of Birth 26/11/2018

Permanent Address NATIDI, DANARA,

Sex FEMALE

VIKRAMPUR, ANGUL, ODISHA, INDIA

Name RASHMIPRIYA SAHOO

Name of Father MALAYA KUMAR SAHOO

Place of Birth DHH ANGUL, ANGUL

Name of Mother SRADHANJALI SAHOO

Date Of Registration 15/12/2018

Registration No 7284/2018



Signature valid

Digitally signed by  
SUBHENDU KUMAR JENA  
Date: 2019.01.23 23:24:59  
IST  
Reason: Birth Application  
Location: ANGUL

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.ulbodisha.gov.in>. Tampering of this certificate  
will attract penal action.

Signature of Issuing Authority

Registrar

Births & Deaths

ANGUL MUNICIPALITY

28/01/2019

Date