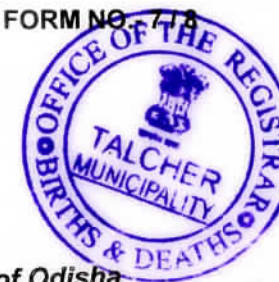


(English Version)



FORM NO. 718



GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE
TALCHER 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 TALCHER MUNICIPALITY of Tahasil TALCHER
of District ANGUL of State of ODISHA

Date of Birth 25/01/2017

Sex MALE

Name SABNAM SAHOO

Name of Father SARATHI SAHOO

Name of Mother PINKY BEHERA

Date Of Registration 31/01/2017

Permanent Address HILOI, PADMABATIPUR,

TALCHER, ANGUL, ODISHA, INDIA

Place of Birth SANJIBANI CLINIC, TALCHER

Registration No 128/2017



Date :
10/08/2017

10-8-17
REGISTRAR
BIRTHS & DEATHS
Talcher Municipality
Births & Deaths
TALCHER MUNICIPALITY