(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 22/05/2017

Sex MALE

Name ARYAN BEHERA

Name of Father NILAMBARA BEHERA

Name of Mother JHULANA BEHERA

Date Of Registration 09/06/2017

Permanent Address BADASINGHADA, BIKRAMPUR, ANGUL, ODISHA, INDIA

Place of Birth DHH ANGUL, ANGUL

Registration No 3253/2017

Signature of the Authority
Registrar
Births & Deaths
ANGUL MUNICIPALITY

Date : 09/08/2017