(English Version)

FORM NO.- 7 / 8

GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE

ANGUL MUNICIPALITY

CERTIFICATE OF BIRTH

Issued under Section 12 (7) 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 03/04/2016

Sex MALE

Name AYUSH BEHERA

Name of Father MANAS RANJAN BEHERA

Name of Mother PINKY SAHU

Date Of Registration 22/04/2016

Permanent Address GOPARA BIKRAMPUR ANGUL ODISHA, INDIA

Place of Birth DHH ANGUL ANGUL

Registration No 2811/2016

Date : 4-03-2017

Signature of Issuing Authority
Registrar
Births & Deaths
ANGUL MUNICIPALITY