

(English Version)



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 Tahsil **TALCHER**

of District **ANGUL** of State of **ODISHA**

Date of Birth **05/12/2016**

Sex **FEMALE**

Name **KHYATISREE BISWAL**

Name of Father **BISWANATH BISWAL**

Name of Mother **TIKI BISWAL**

Date Of Registration **12/12/2016**

Permanent Address **GURUDWAR, SOUTH BALANDA,**

VIKRAMPUR, ANGUL, ODISHA, INDIA

Place of Birth **SUBDIVISIONAL HOSPITAL,**

TALCHER

Registration No **1866/2016**



Date : **17/07/2017**



REGISTRAR
Sign **BIRTHS & DEATHS** Authority
Talcher Municipality
Births & Deaths
TALCHER MUNICIPALITY