## FORM NO. 9

(See Rule 9)

## GOVERNMENT OF ORISSA DEPARTMENT OF HEALTH & FAMILY WELFARE

CERTIFICATE OF BIRTH issued under Section 12 of the Registration of Births and Deaths Act 1969

THIS IS TO CERTIFY THAT the following information has been taken from the original record of birth which is in the register	
for 2010-11 of Angul NA	tahsil Angul, of (local area)
for 2010-11 of Angus M. A. M. G. district Angus of State of Orissa.	
Name BARSA PRIVADARSANI BISWANtame of father/mother PRAMOD BISWAL	
Sex FEMALS	Registration No 160/-9-91
Date of birth 08-05, - 2010	Nationality of father/mother
Place of birth Angul Horpital	Date of Registration #5-05-2210
Val.	
Signature of Issuing Authority.	
De la Caracteria de la	Permanent address of father/mother
Registrar of Births & Deure.  and Sealing Office	AT DANARA
ARRILL N. L.C.	P/O-DANARA VIA-DERACOLLDIR
	DILT-ANGUL
Date	