

(English Version)

FORM NO-7/8

ISSUE NO : 281/2021



GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
GODIBANDHA CHC



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 following information has been taken from the original records of birth which is in the register for **GODIBANDHA CHC** of Tahasil **TALCHER** of District **ANGUL** of State **ODISHA**

Date of Birth..... 05/03/2021..... Permanent Address..... TENTULEI, BIKRAMPUR,
Sex..... FEMALE..... ANGUL, ODISHA, INDIA.....
Name..... ADYASHA MOHANTY.....
Name of Father..... BISWAJIT MOHANTY.....
Name of Mother..... PRATIMA MOHANTY.....
Date Of Registration..... 10/03/2021..... Place of Birth..... SS HOSPITAL, GODIBANDHA,
Registration No..... 369/2021..... ANGUL



Signature valid

Digitally signed by
DR SATYAPRIYA SAMBIT
Date: 2021.03.10 13:59:21
IST
Reason: Bir Certificate
Location: GODIBANDHA

DR SATYAPRIYA SAMBIT
Issuing Authority
Registrar, Births & Deaths
GODIBANDHA CHC

Date : 22/04/2021

Note: It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature. This certificate is issued as per section 4,5&6 of Information Technology Act 2000 and its subsequent amendments in 2008. For any query or verification, please visit <https://www.birtheath.odisha.gov.in> Tampering of this certificate will attract penal action.