(English Version)



FORM NO-5 ISSUE NO: 783/2023



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 8/13 Rule of the Odisha Registration of 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

NAME: SALIN PRADHAN

SEX: FEMALE

DATE OF BIRTH: 27/05/2012

PLACE OF BIRTH: KRISHNA CLINIC, GODIBANDHA, ANGUL

NAME OF MOTHER: MAMATA PRADHAN

NAME OF FATHER: SUNIL KUMAR PRADHAN

MOTHER'S ID PROOF NO:

FATHER'S ID PROOF NO:

ADDRESS OF PARENT AT THE TIME OF CHILD BIRTH:BADASINGHADA, N.S NAGAR BHARATPUR, VIKRAMPUR, ANGUL, ODISHA, INDIA PERMANENT ADDRESS OF PARENTS: BADASINGHADA, N.S NAGAR BHARATPUR, VIKRAMPUR, ANGUL, ODISHA, INDIA

REGISTRATION NO: 1115/2012

REGISTRATION DATE: 30/05/2012

UBRN NO: 21RB344-0113-001115-2012 DATE OF ISSUE: 06/04/2023



Signature valid

Digitally signed by
KARNARAM MODERNTA
Date: 2020 0447 11:36:18 IST
Reason: Birth gertificate
Location: GON BANDHA

Dr Kamaram Mahanta Issuing Authority Registrar, Births & Deaths GODIBANDHA CHC

THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FASCIMILE SIGNATURE OF THE ISSUING AUTHORITY.

It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature, stamp or seal. This certificate is issued as per section 4,5 & 6 of information technology Act 2000 and it's subsequent amendments in 2008. For any query or verification, please visit https://www.birthdeath.odisha.gov.in Tampering of this certificate will attract penal action.