

ଓଡ଼ିଶା ଓଡ଼ିଶା ସରକାର GOVERNMENT OF ODISHA ସ୍ୱାହ୍ୟ ଓ ପରିବାର କଲ୍ୟାଣ ବିଭାଗ DEPARTMENT OF HEALTH AND FAMILY WELFARE COMMUNITY HEALTH CENTER GODIBANDHA



## ଜନ୍ନ ପ୍ରମାଣପତ୍ର BIRTH CERTIFICATE

COMMUNITY HEALTH CENTER GODIBANDHA

( ଜନ୍ମ ,ମୃତ୍ୟୁ ଫଜିକରଣ ଅଧିନିୟମ , ୧୯୬୯ ର ଧାରା ୧୨/୧୭ ତଥା ଓଡ଼ିଶା ଜନ୍ନମୃତ୍ୟୁ ଫଜିକରଣ ନିୟମ ,୨୦୦୧ ର ନିୟମ ୮/୧୩ ଅନୁସାରେ ପ୍ରଦାନ କରାଗଲା ) (ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE ODISHA REGISTRATION OF BIRTHS & DEATHS RULES 2001)

ଏହା ପ୍ରମାଣ କରାସାଉଅଛି କି ନିମ୍ନଲିଖିତ ସ୍ୱଚନା ହନ୍ଦର ମୂଳ ଅଭିଲେଖାରୁ ଗୁହିତ ହୋଇଅଛି , ସାହା . ଓଡ଼ିଶା ରାଜ୍ୟ ଜିଲ୍ଲା ସ୍ଥାନୀଅ ଅତଳ ତହସିଲ୍ / କ୍ଲକ୍ COMMUNITY HEALTH CENTER GODIBANDHA ପାଇଁ ରେଜିଷ୍ଟ ରେ ଉଲ୍ଲିଖିତ ଅଛି THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR COMMUNITY HEALTH CENTER GODIBANDHA OF TAHSIL/BLOCK TALCHER SADAR OF DISTRICT ANGUL OF STATE/UNION TERRITORY ODISHA, INDIA.

ପ୍ରଥମ ନାମ / NAME: DARPA NARAYAN SAHOO

ଜନ୍ନ ତାରିଖ / DATE OF BIRTH: 09-03-2016 NINTH-MARCH-TWO THOUSAND SIXTEEN

ମାତ୍ୟକ ନାମ / NAME OF MOTHER: MINATI SAHOO

ଏକକ ଚିନ୍ନଟ ସଂଖ୍ୟା / MOTHER'S UID NO:

ଶିଶ୍ର ର ଜନ୍ଧ ସମୟ ରେ ମାତା ପିତୀକ ଠିକଣା / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

HENSAMUL, , TALCHER SADAR, ANGUL , ODISHA

ପଜିକରଣ ସଂଖ୍ୟା / REGISTRATION NUMBER: B-2016: 21-01512-000755

ମନ୍ତୁକ୍ୟ / REMARKS (IF ANY):

ନିଗମନ ତାରେ / DATE OF ISSUE: 25-06-2016 ଳିଂଗ / SEX: ପୂର୍ଷ / MALE

ଜନ୍ନ ପ୍ଲାନ / PLACE OF BIRTH: GODIBANDHA CHC

ପିତୀକ ନାମ / NAME OF FATHER: GURUCHARAN SAHOO

ପିତାକ ଏକକ ଚିନ୍ନଟ ସଂଖ୍ୟା / FATHER'S UID NO:

ପିତା ମାତୀକ ପ୍ଲାୟୀ ଠିକଣା/ PERMANENT ADDRESS OF PARENTS:

HENSAMUL, TALCHER SADAR, ANGUL, ODISHA

ପଂଜିକରଣ ତାରିଖ / DATE OF REGISTRATION: 21-04-2016

ନିରମନ ଅଧିକାରୀ / ISSUING AUTHORITY :

REGISTRAR (BIRTH & DEADWAY)
COMMUNITY HEALTH CENTER GODIBANDHA
COMMUNITY HEALTH CENTER GODIBANDHA

505/6

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THE AUTHENTICITY OF THIS CERTIFICATE CAN BE VERIFIED FROM THE WEBSITE CRSORGI.GOV.IN.

THE REGISTRATION NUMBER IS UNIQUE TO EACH EVENT.

" প্রচণ্ডন জন্ম খন পুরুত্ব অভিনতন পুরুত্তি ভারত্ত্ব " / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH"

