

(English Version)



FORM NO-7/8

ISSUE NO : 11179/2022

GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
Berhampur Municipal Corporation

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 **Berhampur Municipal Corporation** of Tahasil **BERHAMPUR**
of District **GANJAM** of State **ODISHA**



Date of Birth..... **20/11/2020**

Permanent Address..... **AT-GURDWAR SOUTH BALANDA,**

Sex..... **FEMALE**

PO-SOUTH BALANDA, PS-BIKRAMPUR, ANGUL,

Name **JIGYASA BARIK**

ODISHA, INDIA

Name of Father **KRUTIBASH BARIK**

Place of Birth..... **CITY HOSPITAL, BERHAMPUR**

Name of Mother **PRIYANKA BARIK**

Date Of Registration..... **21/11/2020**

Registration No..... **21841/2020**



Signature valid

Digitally signed by MANAS
RANJAN PANDA
Date: 2022.05.04 13:40:33
IST
Reason: Birth Application
Location: BERHAMPUR

DR MANAS RANJAN PANDA

Issuing Authority

Registrar, Births & Deaths

BERHAMPUR MUNICIPAL CORPORATION

Date :04/05/2022

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.