



DEPARTMENT OF HEALTH AND FAMILY WELFARE



COMMUNITY HEALTH CENTRE PATANA

ଜନ୍ନ ପ୍ରମାଣପତ୍ର BIRTH CERTIFICATE

(ଜନ୍ମ, ମୃତ୍ୟୁ ମହିକରଣ ଅଧିନିୟମ , ୧୯୬୯ ର ଧାରା ୧୬/୧୭ ତଥା ଓଡ଼ିଶା କନ୍ତୁମୃତ୍ୟୁ ମହିକରଣ ନିୟମ, ୨୦୦୧ ର ନିୟମ ୮/୧୩ ଅନୁସାରେ ସ୍ୱାସନ କରାଗଣ) (ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE ୧/13 OF ୮HE ODISHA REGISTRATION OF BIRTHS & DEATHS **RULES 2001)**

ଏହା ପ୍ରମାଣ କରାପାଉଅଛି କି ନିମ୍ନକିଞ୍ଚ ପ୍ରତମା ଜମ୍ବର ମୂଳ ଅଭିକେଖାଗୁ ଗୁଡିଡ ହୋଇଅଛି , ସାହା , ଓଡିଶା ଭାବେ ଜିଲ୍ଲା ହୁନ୍ତୀଅ ଅବନ ବହସିଲ୍ / ବୃକ ପାଇଁ ରେଡିଞ୍ ରେ ରଲ୍ଲିଞ୍ଚ

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE OPIGE: ALL RECORD OF BIRTH WHICH IS THE RECISTER FOR COMMUNITY HEALTH CENTRE PATANA OF TAHSIL/BLOCK PATANA OF DISTRICT KENDUIHAR OF STATE/UNION TERRITORY ODISHA, INDIA.

প্রপ্রার / NAME: KHILESH KUMAR NAYAK

ହଳ ତାରିଖ / DATE OF BIRTH: 10-04-2017 TENTH-APRIL-TWO THOUSAND SEVENTEEN

FINITE SIGI / NAME OF MOTHER: GEETA NAYAK

ENERGY GIO / MOTHER'S AADHAAR NO:

ିଶା ର ଜନ୍ନ ସମସ ରେ ମାତା ପିତାକ ତିକଣା / ADDRESS OF PARENTS AT THE TIME OF BARTH OF THE CHILD:

PANASAPAL, SALARAPADA, KARANJIA (NAC), , UDALA, MAYURBHANJ, ODISHA

a Saga ster / REGISTRATION NUMBER: B-2017: 21-00277-000379

PQ74 / REMARKS (IF ANY):

ନିରମନ ବାରିଖ / DATE OF ISSUE: 07-09-2019

AG / SEX: DOB / MALE

ଜନ୍ନ ହାନ / PLACE OF B:RTH: KHIREITANGIRI SC

DOTO GIS! / NAME OF FATHER. IAYADEB WAYAK

ZINIA SIG / FATHER'S AADHAAR NO:

GOI SIGN DIGIT OF BY PERMANENT ADDRESS OF PARENTS:

PANASAPAL. SALARAPADA, KARANJIA (NAC), UDALA, MAYURBHANJ. ODISHA

ଫେଡିକରଣ ତାରେଖ / DATE OF REGISTRATION: 23-04-2017

คีสศค ฮนุคเลไ

ନ ଅଧିକାରୀ ୬ ISSYLMS AUTHORITY : କେଡ଼ିଆର (ଜନ୍ମ ସ ମୃବିଧି) REGISTRAR (BIRTH & DEATH)

COMMUNITY HEALTH CENTRE PATANA

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"THIS IS A COMPUTER GENERATED CERTIFICATE." * THE GOVE OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES".

ପ୍ରତ୍ୟେକ ଜନ୍ମ ଏବଂ ମୃତ୍ୟୁର ଫର୍ଡ଼କରଣ ପ୍ରତିଷ୍ଠିତ କରନ୍ତୁ " / ENSURE REGISTRATION OF EVERY BURTH AND DEATH"