(English Version)

FORM NO. 7 (8)

GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE
TALCHER MUNICIPALITY

OFFICE OF THE REGISTRAR TALCHER MUNICIPALITY BIRTHS & DEATHS

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 the following information has been taken from the original record of birth which is in the register for TALCHER MUNICIPALITY of Tahasil TALCHER of District ANGUL of State of ODISHA

Date of Birth 25/03/2014

Sex FEMALE

Name TRISHARANI BHUTIA

Name of Father AJAYA BHUTIA

Name of Mother SANDHYARANI BHUTIA

Date Of Registration 13/04/2014

Permanent Address EKDAL, PADMABATIPUR, TALCHER, ANGUL, ODISHA, INDIA

Place of Birth SUBDIVISIONAL HOSPITAL, TALCHER

Registration No 664/2014

7.10.16

REGISTRAR
BIRTHS & DEATHS
Talcher Municipality

Signature of Issuing Authority
Registrar
Births & Deaths
TALCHER MUNICIPALITY

Date :
05/10/2016