(English Version) FORM NO.- 7 / 8

# GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE
ANGUL MUNICIPALITY

Register of Birth & Death
Angul Municipality

# 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 ANGUL MUNICIPALITY of Tahasil ANGUL of District ANGUL of State of ODISHA

Date of Birth 30/09/2016

Sex FEMALE

Name TEJASWANI BEHERA

Name of Father CHANDAN BEHERA

Name of Mother SUMITRA BEHERA

Date Of Registration 17/10/2016

Permanent Address BADASINGADA, ANGUL, ODISHA, INDIA

Place of Birth DHH ANGUL, ANGUL

Registration No 7170/2016

Date : 20/05/2017

Signature of Issuing Authority
Registrar
Births & Deaths
ANGUL MUNICIPALITY