(English Version)

FORM NO.- 7 / 8

GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE

TALCHER 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 TALCHER MUNICIPALITY of Tahasil TALCHER of District ANGUL of State of ODISHA

Date of Birth 21/01/2016

Sex MALE

Name SATYAM SAIJEET SINGH

Name of Father BAPENDRA SINGH

Name of Mother SWARNALATA SINGH

Date Of Registration 25/01/2016

Permanent Address SINGHSAHI, TALCHERTOWN, TALCHER, ANGUL, ODISHA, INDIA, 759107

Place of Birth KARUNAKARA SEBA SADANA, TALCHER

Registration No 157/2016

31.3.16

REGISTRAR BIRTHS & DEATHS TALCHER MUNICIPALITY

Signature of Issuing Authority

Registrar

Births & Deaths

TALCHER MUNICIPALITY

Date : 29/03/2016