(English Version)





FORM NO-7/8

ISSUE NO: 100/2021

GOVERNMENT OF ODISHA DEPARTMENT OF HEALTH AND FAMILY WELFARE GODIBANDHA CHC

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 GODIBANDHA CHC of Tahasil TALCHER of District ANGUL of State ODISHA

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Name of Father NOUSAD AHAMAD	Name AYAN AHAMAD	SexMALE	Date of Birth31/01/2021
Place of Birth SUBHALAXMI NURSING HOME,		ANGUL, ODISHA, INDIA	Permanent Address JAGANNATHPUR, COLLIER

RY,



Name of Mother....

KISMATUN HANNISA

Date Of Registration.....

15/02/2021

Registration No....

231/2021

GODIBANDHA, ANGUL

Date:22/03/2021



DR SATYAPRIYA SAMBIT

Issuing Authority

Registrar, Births & Deaths

GODIBANDHA CHC

Act 2000 and its subsequent amendments in 2008. For any query or verification, please visit https://www.birthdeath.odisha.gov.in Tampering of this certificate will attract penal action. 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