

FORM NO-7/8

ISSUE NO: 3877/2020

DEPARTMENT OF HEALTH AND FAMILY WELFARE GOVERNMENT OF ODISHA

Bhubaneswar Municipal Corporation

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 Bhubaneswar Municipal Corporation of Tahasil BHUBANESWAR of District KHORDHA of State ODISHA

Date Of Registration18/10/2019	Name of Mother LIPIKA CHAND	Name of Father MANAS RANJAN KUMAR	Name SANSKRITI SAI SAMPURNA	Sex FEMALE	Date of Birth10/10/2019
Registration No22468/2019	HOSPITAL, BHUBANESWAR	Place of BirthHITECH MEDICAL COLLEGE AND	ANGUL, ODISHA, INDIA	PO-TALCHER, PS-TALCHER TOWN, DIST.	Permanent AddressAT-TALCHER HATATOTA,

Date:07/02/2020

DR BASANTA KUMAR MISHRA

Issuing Authority

BHUBANESWAR MUNICIPAL CORPORATION Registrar, Births & Deaths

Act 2000 and its subsequent amendments in 2008. For any query or verification, please visit https://www.ulbodishu.gov.in. Tumpering 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