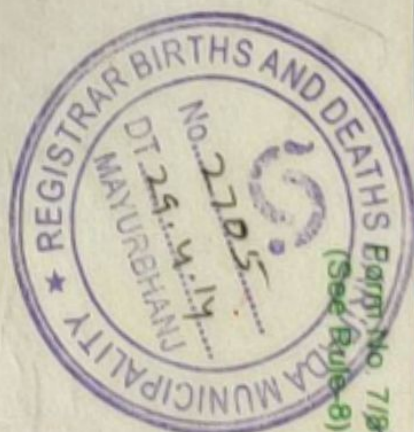




GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
BARIPADA MUNICIPALITY
CERTIFICATE OF BIRTH



Issued under section ~~1217~~ of the Registration of Births and Deaths Act, 1969 and rules of Odisha
Births and Deaths, Rule 2001.

It is to certify that the following information has been taken from the original record of birth which is in the
register for **BARIPADA MUNICIPAL COUNCIL**
of District **MAYURBHANJ** of State of **ODISHA** of Tahasil **BARIPADA**

Date of Birth **21/11/2013**

Permanent Address **AT-RANGAMATI,**

Sex **MALE**

PS-BARIPADA, MAYURBHANJ, ODISHA, INDIA

Name **KRISHNA SINGH**

Name of Father **GHASIRAM SINGH**

Place of Birth **BARIPADA HEAD QUARTER**

Name of Mother **SIBANI SINGH**

HOSPITAL, BARIPADA

Date Of Registration **02/12/2013**

Registration No. **9187/2013**

Signature of issuing Authority

Registrar

Births & Deaths

Date **29.4.14**

BARIPADA MUNICIPALITY