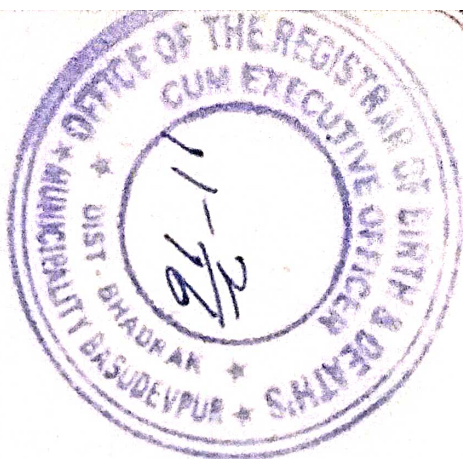


FORM No. 8

(See Rule 8)

BIRTH CERTIFICATE

(Issued under Section 12)



This is to certify that the following information has been taken from the original record of birth which is the registre

Basudevpur Municipality of Tahasil Basudevpur

of District *Bhadrak* of State of Orissa

Name *RUPRAKSH ROUL* Name of Mother *Manabara*

Sex *male* Permanent Address of parents *At/PO - Keisma Dist - Bha*

Date of Birth *16-01-2016*

Place of Birth *CHC - Basudevpur* Registration No. *149*

Name of Father *Amit Kumar Roul* Date of Registration *20-1-*

Date *11-2-16*

Signature of Issuer
REGISTRAR OF BIRTH & DEATHS
CUM-EXECUTIVE OFFICER
MUNICIPALITY
Bhadrak District