

MUNICIPAL CORPORATION OF DELHI
Health Department

Thank you for birth registration
Registration No. is MCDOLIR-0115-006510586

Birth Reg. No.	MCDOLIR-0115-006510586	Time of Birth	23:53
Birth Date	03/03/2015	Gender	Female
Name of the Mother	PRIYANKA AMOL MALI	Name of the Father	AMOL ANIL MALI
Child Name	ANANYA AMOL MALI		
Place of Birth	Institutional		
Zone	Najafgarh Zone	Ward	
Colony		Address	
Hospital Name	DIVYA PRASTHA HOSPITAL	Hospital Address	, Delhi, 110045
Permanent Address	VILLAGE & POST KURLE, TEHSEL - KHATAU, DISTRICT - SATARA, MAHARASHTRA	Communication Address	WZ 24A, ADADRSR GALL, PALAM VILLAGE, NEW DELHI 110045
Place Type	Not Stated	Place Name	PALAM
District	NAJAFGARH	State	Delhi
Religion	Hindu		
MOTHER'S DETAILS			
Mother's Education	Below Graduate	Father's Education	Below Graduate
Mother's Occupation	Non Worker OR Housewife	Father's Occupation	Private Service
Mother's Age (at the time of marriage)	21 Years	Mother's Age (at the time of this child birth)	23 Years
No. of Children	1		
Type of Attention at Delivery	Inst(Private)		
Method of Delivery	Natural		
Birth Weight	2.90 Kg		
Duration of pregnancy	36 Weeks		
INFORMANT DETAILS			
FATHER'S DETAILS			

