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महाराष्ट्र शासन

GOVERNMENT OF MAHARASHTRA

आरोग्य विभाग

DEPARTMENT OF HEALTH

छावणी परिषद PDF_STATIC_LABEL_BD_CB_HI_PB_PUNE
CANTONMENT BOARD PDF_STATIC_LABEL_BD_CB_EN_PB_PUNE

जन्म प्रमाणपत्र BIRTH CERTIFICATE



प्रमाणित करण्यात येत आहे की, खालील माहिती जन्माच्या मूळ अभिलेखाच्या नोंदवहीतून घेण्यात आली आहे, जी की,PDF_STATIC_LABEL_BD_CB_HI_PB_PUNE <mark>छावणी परिषद, तालु</mark>का PDF_STATIC_LABEL_BD_BL_HI_PUNE_CITY, जिल्हा PDF_STATIC_LABEL_BD_DIST_HI_PUNE, महाराष्ट्र राज्य/केंद्रशासित प्रदेश, भारत च्या नोंदवहीत उल्लेख आहे.

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR CANTONMENT BOARD PDF_STATIC_LABEL_BD_CB_EN_PB_PUNE OF TAHSIL/BLOCK PDF_STATIC_LABEL_BD_BL_EN_PUNE_CITY OF DISTRICT PDF_STATIC_LABEL_BD_DIST_EN_PUNE OF STATE/UNION TERRITORY MAHARASHTRA, INDIA.

नाव / NAME: MAYANK MALYADRI KAMANBOINA

जन्म तारीख / DATE OF BIRTH: 23/05/2018

आईचे पूर्ण नाव / NAME OF MOTHER: REKHA MALYADRI KAMANBOINA

आधार क्रमांक / MOTHER'S AADHAAR NO:

बाळाच्या जन्माच्यावेळी आई-वडिलांचा पत्ता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

नोंदणी क्रमांक / REGISTRATION NUMBER: B-2018: 27-90175-001488

शेरा / REMARKS (IF ANY): PARENTS NAME CORRECTION AS PER FORM NO.2 DT.17/12/2018 FWD REPORT FROM COMDT CH(SC) PUNE-40. CHILD MIDDLE NAME CORRECTED AS PER AFF. NO.1587/18/12/23 DT.18/12/23 AND LEGAL OPINION N OFFICE NOTE DT.22/12/2023:

प्रमाणपत्र दिल्याचा दिनांक / DATE OF ISSUE: 02/01/2024

लिंग / SEX: Male

जन्म ठिकाण/ PLACE OF BIRTH: COMMAND HOSPITAL PUNE

FORM-5

वडिलांचे पूर्ण नाव / NAME OF FATHER: MALYADRI MALAKONDAYA KAMANBOINA

आधार क्रमांक / FATHER'S AADHAAR NO:

आई-वडिलांचा कायमचा पत्ता/ PERMANENT ADDRESS OF PARENTS: South Main Rd Koregaon Park Pune Pune City Pune Maharashtra

नोंदणी दिनांक / DATE OF REGISTRATION: 30/05/2018

निर्गमित करणारे अधिकारी / ISSUING AUTHORITY : रजिस्टार (जन्म व मृत्यु)

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