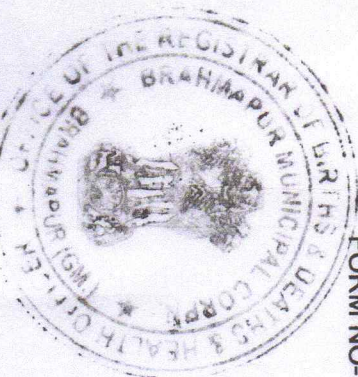


GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
BERHAMPUR MUNICIPAL CORPORATION



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 **BERHAMPUR MUNICIPAL CORPORATION** of Tahasil **BERHAMPUR** of District **GANJAM** of State **ODISHA**

Date of Birth..... **29/01/2013**

Permanent Address..... **TENTULIAPALLI, KHALIKOTE,**

Sex..... **MALE**

GANJAM, ODISHA, INDIA

Name..... **SAI PRASAD SWAIN**

.....

Name of Father..... **JAGANNATH SWAIN**

Place of Birth..... **CHRISTIAN HOSPITAL, BERHAMPUR**

Name of Mother..... **SUREKHA SWAIN**

.....

Date Of Registration..... **31/01/2013**

Registration No..... **1511/2013**

Date :26/08/2015

Note: This certificate is issued as per section 4,5&6 of Information Technology Act 2000, and its subsequent amendments in 2008. For any query or verification, please visit <https://www.albodisha.gov.in>. Tampering of this certificate will attract penal action.

REGISTRAR OF BIRTHS AND DEATHS & HEALTH OFFICER
BERHAMPUR MUNICIPAL CORPORATION

Surekha Swain
26.8.2015

Surekha Swain