



GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
BHUBANESWAR MUNICIPAL CORPORATION
CERTIFICATE OF BIRTH

FORM NO. - 7 / 8

NO. 9343 PHVS

dt. 2/4/16

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 the following information has been taken from the original record of birth which is in the register for **Bhubaneswar Municipal Corporation** of District **KHORDHA** of State of **ODISHA** of Tahasil **BHUBANESWAR**

Date of Birth..... **11/09/2015**

Permanent Address..... **AT-JAGALIAPADA**

Sex..... **MALE**

PO-LAXMINARAYANPUR, VIA-BALAKATI, PURI,

Name..... **RUDRANSA BEHERA**

ODISHA, INDIA

Name of Father..... **BIJAYA KUMAR BEHERA**

Place of Birth..... **HITECH MEDICAL COLLEGE AND**

Name of Mother..... **DIPTIRANI PANDA**

HOSPITAL, BHUBANESWAR

Date Of Registration..... **18/09/2015**

Registration No..... **18723/2015**

Signature valid

Digitally signed by **CHANDRIKA PRASAD DAS**
Date: 2016.07.27 13:54:25
Reason: Birth Application
Location: BHUBANESWAR

Note: It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature. This certificate is issued as per section 4, 5 & 6 of Information Technology Act 2000 and its subsequent amendments in 2008. For any query, please visit <https://www.ubodisha.gov.in>. Tampering of this certificate will attract penal action.

Signature of Issuing Authority

Registrar

Date

29/03/2016

BHUBANESWAR MUNICIPAL CORPORATION