

(English Version)

FORM NO-7/8



GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
SAMBALPUR 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 **SAMBALPUR MUNICIPAL CORPORATION** of Tahasil **SAMBALPUR**
of District **SAMBALPUR** of State **ODISHA**

Date of Birth..... 04/10/2015

Sex..... FEMALE

Name..... RIPANSHI AMOL BHATKAR

Name of Father..... AMOL GHANSHYAM BHATKAR

Name of Mother..... JYOTIRMAI AMOL BHATKAR

Date Of Registration..... 05/10/2015

Permanent Address..... FLAT NO-302, SANSKRUTI

DARSHAN, PLOT NO. 164/3 DALVINAGAR,

CHINCHWAD, PUNE, MAHARASHTRA, INDIA

Place of Birth..... SRUSTI NURSING HOME, SAMBALPUR

Registration No..... 10322/2015

Date :01/01/2016

Signature of Issuing Authority
Registrar
Births & Deaths
SAMBALPUR MUNICIPAL CORPORATION

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.ulbodisha.gov.in>. Tampering of this certificate will attract penal action.

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AUTHENTICATED

[Signature]
6/1/2022



Dr. Santosh Bala
Special Secretary
Home Department
Govt. of Odisha
Bhubaneswar (INDIA)