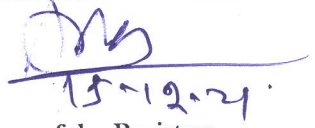




5
OFFICE OF THE REGISTRAR, HINDU MARRIAGES
&
GPEO,
BARCHANA, DIST. JAJPUR, ODISHA, INDIA

Certified copy of Registration of Hindu Marriage under Hindu
Marriage Registration Rule-1960, Odisha
Registration No. 426 Dt.15-12-2021

1. Date of Application	03-12-2021
2. Name & Present Address of the Applicants	1. Jyoti Prakash Sahoo. S/O:- Jadunath Sahoo . At:-Kharagpur, PO- Kailashree Gopalpur, PS- Balichandrapur, Dist:- Jajpur, Odisha, India, Pin- 754292 2. Jyostnamayee Sahoo. W/o- Jyoti Prakash Sahoo. At:-Kharagpur, PO- Kailashree Gopalpur, PS- Balichandrapur, Dist:- Jajpur, Odisha, India, Pin- 754292
3. Date & Place of Marriage	21-04-2017 SRASHTA TOWN HALL At/PO/PS-Jatani, Dist:- Khordha, Odisha, India, Pin- 752050
4. Age of Parties at the time of Marriage	i. Bridegroom- 35 years ii. Bride- 25 years
5. Name & Present Address of the Guardians of the Parties of the Marriage	1. Jadunath Sahoo. Father of Jyoti Prakash Sahoo. At:-Kharagpur, PO- Kailashree Gopalpur, PS- Balichandrapur, Dist:- Jajpur, Odisha, India, Pin- 754292 2. Bhikshyakari Sahoo. Father of Jyostnamayee Sahoo. At:-Raja Bazar, PO- Jatani, PS- Jatani, Dist:- Khordha, Odisha, India, Pin- 752050
6. Name & Address of the Witness to the marriage	1. Prakash Ranjan Behera. At:-Kharagpur, PO- Kailashree Gopalpur, PS- Balichandrapur, Dist:- Jajpur, Odisha, India, Pin- 754292
7. Remarks	Certified copy of registration issued to both the parties, Bridegroom & Bride

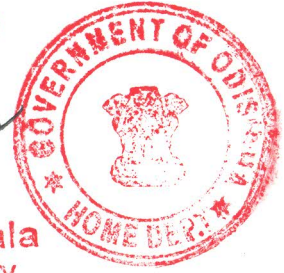

Signature of the Registrar
Hindu Marriage and GPEO,
Barchana, Jajpur, Odisha, India

Gram Panchayat Extension Officer
Barchana

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AUTHENTICATED

[Signature]
19/8/2022



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



居留或定居健康檢查項目表

Health Certificate for Residence Application

(醫院名稱、地址、電話、傳真)

檢查日期 / Date of Examination

(Hospital's Name, Address, Tel, Fax)

2022 / 07 / 19

基本資料 / Basic Data

姓名 Name	JYOSTNAMAYEE SAHOO	性別 Sex	☐ 男 / M ☒ 女 / F
身份證字號 ID No.		護照 Passport No.	P2088731
出生年月日 Date of Birth	1992 / 02 / 13	國籍 Nationality	INDIAN
年齡 Age	30	聯絡電話 Phone No.	7008837083



實驗室檢查 / Laboratory Examinations

A. 胸部 X 光肺結核檢查 / Chest X-ray for Tuberculosis :

X 光發現 / Findings : No obvious abnormality.

判定 / Result : No radiological evidence of pulmonary tuberculosis.

☐ 合格 / Passed ☐ 疑似肺結核 / TB suspect ☐ 無法確認診斷 / Pending ☐ 不合格 / Failed

☐ 孕婦或 12 歲以下兒童免驗 / Not required for pregnant women or children under 12 years of age

B. 腸內寄生蟲糞便檢查 / Stool Examination for Parasites :

☐ 陽性·種名 / Positive, Species ☐ 陰性 / Negative

☐ 其他可不予治療之腸內寄生蟲 / Other parasites that do not require treatment

☐ 來自附錄三之國家/地區者免驗 / Not required for applicants from countries/areas listed in Appendix 3

C. 梅毒血清檢查 / Serological Tests for Syphilis :

檢驗 / Tests :

a. ☐ RPR ☐ VDRL

☐ 陽性 / Positive, 效價 / Titers ☒ 陰性 / Negative, 效價 / Titers

b. ☐ TPHA ☐ TPPA ☐ FTA-abs ☐ TPLA ☐ EIA ☐ CIA

☐ 陽性 / Positive, 效價 / Titers ☐ 陰性 / Negative, 效價 / Titers

c. ☐ other ☐ 陽性 / Positive, 效價 / Titers

☐ 陰性 / Negative, 效價 / Titers

判定 / Result : ☐ 合格 / Passed ☐ 不合格 / Failed

☐ 15 歲以下兒童免驗 / Not required for children under 15 years of age

D. 麻疹及德國麻疹之抗體陽性檢查報告或預防接種證明 / Proof of Positive Measles and Rubella,

Antibody or Measles and Rubella Vaccination Certificates :

a. 抗體檢查 / Antibody Tests

麻疹抗體 / Measles Antibody ☒ 陽性 / Positive ☐ 陰性 / Negative ☐ 未確定 / Equivocal

德國麻疹抗體 / Rubella Antibody ☒ 陽性 / Positive ☐ 陰性 / Negative ☐ 未確定 / Equivocal

b. 預防接種證明 / Vaccination Certificates (證明應包含接種日期、接種院所及疫苗批號; 接種日期與出國日期應至少間隔兩週 / The certificate should include the date of vaccination, the name of administering hospital or clinic and the batch no. of vaccine; the date of vaccination should be at least two weeks prior to traveling overseas.)

☐ 麻疹預防接種證明 / Measles Vaccination Certificate

☐ 德國麻疹預防接種證明 / Rubella Vaccination Certificate

c. ☐ 有接種禁忌·暫不適宜預防接種 / Having contraindications, not suitable for vaccination

Dr. Adya Kinkar Panda
Associate Professor
Department of Radiology
Regd. No-16487107
IMS & SUM Hospital, BBSR

Dr. P. K. NAIK, MD
DEPT. OF MEDICINE
IMS & SUM HOSPITAL

Dr. Debashmita Tripathy
Prof. Dept. of Medicine
Regd. No-16640 / 09
IMS & SUM HOSPITAL, BBSR

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AUTHENTICATED

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19/8/2022



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

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漢生病檢查 / Examinations for Hansen's Disease

全身皮膚視診結果 / Skin Examination

☒ 正常 / Normal

☐ 異常 / Abnormal : ☐ 非漢生病 / Not related to Hansen's disease : _____

☐ 疑似漢生病須進一步檢查 / Hansen's disease suspect who needs further examinations

a. 病理切片 / Skin Biopsy : _____

b. 皮膚抹片 / Skin Smear : ☐ 陽性 / Positive ☐ 陰性 / Negative

c. 皮膚病灶合併感覺喪失或神經腫大 / Skin lesions combined with sensory loss or enlargement of peripheral nerves : ☐ 有 / Yes ☐ 無 / No

判定 / Result :

☒ 合格 / Passed ☐ 須進一步檢查 / Needs further examinations ☐ 不合格 / Failed

☐ 來自附錄四之國家/地區者免驗 / Not required for applicants from countries/areas listed in Appendix 4

No clinical signs
of Hansen's
dis.

Skin is normal.

健康檢查總結果 / The final result of health examination :

☐ 合格 / Passed ☐ 須進一步檢查 / Need further examinations ☐ 不合格 / Failed

負責醫檢師簽章 / Signature of Chief Medical Technologist : _____

負責醫師簽章 / Signature of Chief Physician : _____

醫院負責人簽章 / Signature of Superintendent : _____

日期 / Date : 2022 / 07 / 19

備註 / Note : 本證明三個月內有效。 / The certificate is valid for three months.

Dr. Debansita Tripathy
Asst. Prof. Dept. of Medicine
Regd. No-16640
IMS & SUM Hospital, BBSR

Medical Superintendent
IMS & SUM Hospital, BBSR

Dr. Rajashree P. Mohapatra
Asst. Prof. Dept. of SKIN & VD
IMS & SUM Hospital, BBSR
Regd. No-16640
PD-TUE/THU/SAT

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

INS & 20W Hospital, BBSR
Department of Microbiology
BBSR, Odisha
WBBS, MD (Microbiology)
Dr. Rajendra Kumar