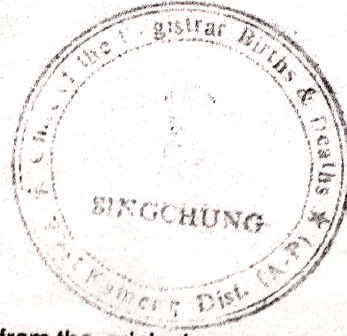


FORM No. 5  
(See Rule 8)

**BIRTH CERTIFICATE**  
(Issued under Section 12/17)



This is to certify that the following information has been taken from the original record of birth which is the register for (Local Area)..... SINGCHUNG  
.....  
of Tahsil..... SINGCHUNG ..... of District..... WEST KAMENG  
.....  
of State..... ARUNACHAL PRADESH .....

Name..... POOJA PHINYA .....

Sex..... FEMALE .....

Date of Birth..... 20TH DECEMBER '1984 .....

Place of Birth..... TENGA MARKET .....

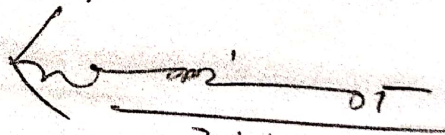
Name of Father..... SHRI SHANKAR PHINYA .....

Name of Mother..... SMTI CHAND PHINYA .....

Registration No..... SNG-213/06 .....

Date of Registration..... 24/07/2006 .....

Date..... 24/7/06 .....

  
Signature of issuing authority  
Registrar

Seal of Births & Deaths  
SINGCHUNG  
West Kameng District  
Arunachal Pradesh