

FORM NO. 9

(See Rule- 9)

GOVERNMENT OF *Andhra Pradesh*

DEPARTMENT *Birth and Death*

CERTIFICATE OF BIRTH ISSUED under section 12 of  
issued under section 17

Registration of Birth and death Act, 1969.

This is to certify that the following information has been taken the  
original record of birth which is in the register for *Namsai* .  
of Tehsil *Namsai* . . . OF *Namsai Circle* . . .

District *Lohit* . . . . . of state *Andhra Pradesh* . . . . .

Name *Him Chhaya . Deo* . . . Sex *Female* . . . . .

Date of Birth *11th June 1984* . . . . . Registration No. *348* . . . . .

Place of Birth *Namsai* . . . . . Date of Registration *19.6.89* . . . . .

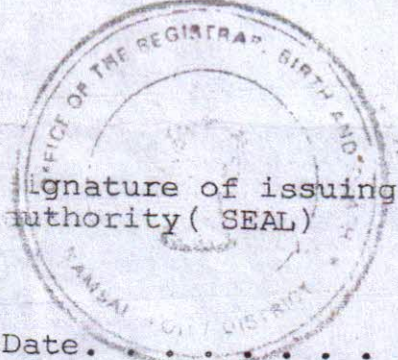
Name of Father /Mother *Shri. Subbamma . Deo* . . . . .

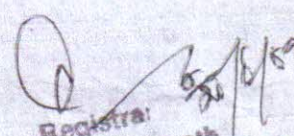
*Mrs. Maya . Deo* . . . . .

~~XXXXXXXXXXXX~~ Permanent address of Father/Mother *Namsai - J.O.A.*

*P.O. Namsai, Lohit District, A.P.* . . . . .

Nationality of Father and Mother *Indian* . . . . .

Signature of issuing  
authority (SEAL)  


  
Registrar  
Chief Registrar  
(Facsimile Signature)  
Namsai  
Lohit District

Date . . . . .