

F C R M No. 9.
(See Rule - 9)

GOVERNMENT OF _____

DEPARTMENT _____

CERTIFICATE OF BIRTH issued under Sec. 12 of the
Registration of Births an' Deaths Act. 1962.

THIS is to certify that the following information has
been taken from the original record of birth which is
in the register for Lekang Circle.

District LOHIT State ARUNACHAL PRADESH

Name SH. GHANACHYAM SORULASex MALE

Date of birth 17.02.77 Registration No 285

Place of birth DIALAMPUR VILL Date of Regn 29-10-90

Name of Father/Mother Permanent address of Father/
Mother Moudupuk Village
Lekang Dist AP

Relationship with
Survival

Nationality Indian

Date: 29-10-90

Signature: