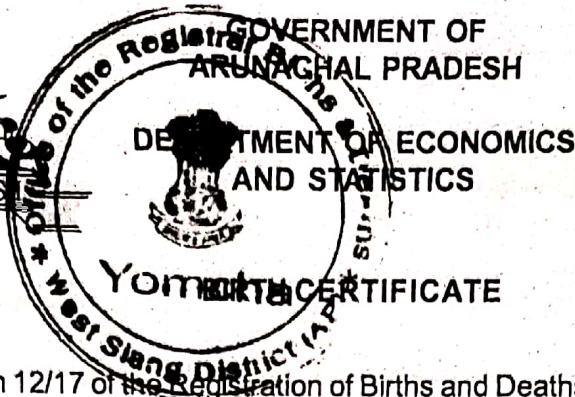


No.

Form-5



(Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and Rule 9/14 of the Arunachal Pradesh Registration of Births and Deaths Rules 2001)

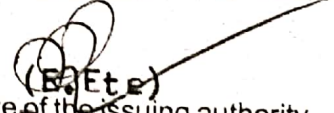
This is to certify that the following information has been taken from the original record of birth which is the register for (local area/local body) **LIVE BIRTH** of tahsil/block . . **PQ/PS. YOMCHA** of District **WEST SIANG** of State **Arunachal Pradesh**.

Name : **MISS GUMYIR GAMLIN** Sex : **FEMALE**
Date of Birth : **29/1/1997** Place of Birth : **TEGO GAMLIN**
Name of Mother : **JUMBOM GAMLIN**
Name of Father : **KIGUM GAMLIN**

Address of parents at the time of birth of the child :
. . . **PO/PS YOMCHA** Permanent address of parents :
. . . **VILLAGE TEGO GAMLIN**
. . . **WEST SIANG DISTRICT** **PO/PS YOMCHA**
. . . **ARUNACHAL PRADESH** **WEST SIANG DISTRICT**
. **ARUNACHAL PRADESH**

Registration No. : **YMC/BD-01/2011-174** Date of Registration : **10/10/2011**

Remarks (if any) : **Nil**


Signature of the issuing authority
Address of the issuing authority
Births & Deaths
. . . **West Siang District**
. . . **Yomcha (A.P.)**

Date of Issue : **10th October 2011**

Seal :-

"Ensure registration of every birth and death"