

FORM No. 9

(See Rule 9)

GOVERNMENT OF _____

DEPARTMENT STATISTIC

CERTIFICATE OF BIRTH

Issued under Sec. 12

Issued under Sec. 17

OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969.

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 MISS ROSLIN NEOG

Sex F Date of birth 05-5-1985 Regn. No. 238

Place of Birth DIGBOI ADC HOSP. Date of Regn. 09-7-91

Name of Father/Mother Shri Laxmi Ranjan Neog

Permanent Address of Father/Mother Sitpani Mokra Village

Lohit Dist - A-P

Nationality INDIAN

Date 09-7-91

Register
Birth and Death
LEKANG
Lohit District.