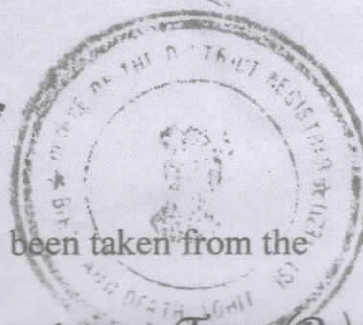


FORM 5
(See Rule 8)

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) *Tezu (R)*

Of Tahsil... *Tezu* of District... *Lohit*

Of State... *Arunachal Pradesh.*

Name... *ANGELINA TAYANG*

Sex... *FEMALE*

Date of birth... *09-01-1992*

Place of birth... *TAFRAGAM*

Name of Father... *LATE BAGILUM TAYANG*

Name of Mother... *SMT. SALOMI TAYANG*

Registration No... *D/216 /05*

Date of Registration... *02-06-05*

Date... *02-06-05*

Signature of Issuing authority

Birth & Death
Lohit District Tezu
(Seal)