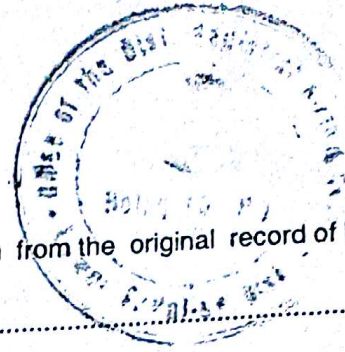


FORM No. 5
(See Rule 8)

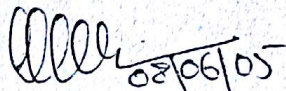
BIRTH CERTIFICATE
(Issued under Section 12/17)



This is to certify that the following information has been taken from the original record of birth which is the register for (Local Area) **ROING** of Tahsil **ROING** of District **LOWER DIBANG VALLEY** of State **ARUNACHAL PRADESH**

Name..... **MISS MINGAM ETE**
Sex..... **FEMALE**
Date of Birth..... **06 TH OCTOBER, 1991**
Place of Birth..... **ROING**
Name of Father..... **Shri Nyamin Etc**
Name of Mother..... **Smti Horjum Etc**
Registration No..... **R- 803**
Date of Registration..... **08-6-2005**

Date. **08-6-2005**


Signature of issuing authority
Sub-Divisional Registrar
Seal Births & Deaths
Lower Dibang Valley Dist.
P.O. [unclear]