

No.

Form 5



GOVERNMENT OF
ARUNACHAL PRADESH
DEPARTMENT OF ECONOMICS
AND STATISTICS



BIRTH CERTIFICATE

(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) **HAYULIANG** of
taluk/block **HAYULIANG** of District **ANJAW** of
State Arunachal Pradesh.

Name **SH. SOYANLUM AMA** Sex **MALE**

Date of Birth **05/08/1990** Place of Birth **VILL.- MOHIKONG**

Name of Mother **SMT. SILANSI AMA**

Name of Father **LT. GORENGLUM AMA**

Address of parents at the time of birth of the child :

**VILL.- MOHIKONG, P.O. HAYULIANG,
DISTT. ANJAW (A.P.)**

Permanent address of parents

**VILL.- MOHIKONG, P.O. HAYULIANG,
P.S. KHUPA, DISTT. ANJAW
(A.P.)**

Registration No. **D-251/07**

Date of Registration **30/7/07**

Remarks (if any) **PRODUCED AFFIDAVIT.**

Date of issue **30/7/07**



Signature of the issuing authority

Address of the issuing authority

**(P. TAYE) ADC
REGISTRAR
BIRTH AND DEATH,
HAYULIANG
(HAYULIANG REGISTRATION UNIT)**

Seal

"Ensure registration of every birth and death"

Sh. Soyanolum AMA