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).

Of Tahsil.

Language of District.

Rash Cianguage of State.

Armanual Procleme

Name MAR/E NyoRi

Sex Female

Date of Birth 02 - 12 - 1985

Place of Birth Pasignat

Name of Father Moman Nyon

Name of Mother Dome vyon

Registration No. 436

Date of Registration 24-06 - 2082

Date.....

Signature of issuing authority

Seal Bart Winna Pietrics.

ASIGNAT A. P. S.