

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) **CHONGKHAM** of Tahsil **CHONGKHAM** of District **LOHIT** of state **ARUNACHAL PRADESH**

Name *Miss Mum Panore*

Sex *female*

Date of Birth *05/10/1990*

Place of Birth *Chongkham*

Name of Father *Shri Oyare Panore*

Name of Mother *Mrs. Yalam Panore*

Registration No *187/06*

Date of Registration *17/5/2006*

Date *17/5/06*

Signature of Issuing Authority
[Signature]
Registrar

Seal

BIRTH AND DEATH
Chongkham Circle, Chongkham.

[Signature]

17/5/06