

Form No. 5

(See Rules)

BIRTH CERTIFICATE

(Issued under Section 12(1))



This is to certify that the following information has been taken from the

original record of birth which is the register for (Local Area) ALONG

of Tahsil ALONG of District WEST SIANG

of State ARUNACHAL PRADESH

Name MISS LINLI GANGKAK

Sex FEMALE

Date of Birth 04-02-1985

In words (FOURTH FEBRUARY

NINETEEN HUNDRED AND EIGHTY FIVE)

Place of Birth ALONG

Name of Father SRI TULI GANGKAK

Name of Mother SMTI YUMBAR GANGKAK

Registration No. ALG-809/2000

Date of Registration 25-08-2000

Date 25-08-2000

Signature of [Signature]
25/08/2000
Sub-District Registrar, Birth & Death
West Siang, Along (A.P.)