



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).....DAPORIJO..... of Tahsil.....DAPORIJO..... of District.....UPPER SUBANSIRI..... of State.....ARUNACHAL PRADESH.....

Name.....SHRI TANA HINIUM.....

Sex.....MALE.....

Date of Birth.....24/10/1996.....

Place of Birth.....VILL-KACHA.....

Name of Father.....SHRI POTOM HINIUM.....

Name of Mother.....SMT.YAKO HINIUM.....

Registration No.....DRJ-691/2006.....

Date of Registration.....22/05/2006.....

Date.....22/05/2006.....

*Jayant...*  
*22/5/2006*  
Signature of issuing authority  
Addl. District Registrar  
Birth & Death  
Seal U/Subansiri District (A-P)  
Daporijo