

# BIRTH CERTIFICATE

FORM NO. 9

(See Rule, 9)

GOVT, OF ARUNACHAL PRADESH

DEPARTMENT OF ECONOMICS & STATISTICS.

~~issued under section. 12~~

Certificate of Birth ..... of the  
issued under section. 17

Registration of Birth and Death Act, 1969.

This is to Certify that the following information has been taken from  
the original record of Birth which is in the register for Birth of .....  
..... of Tehsil... **ALONG** ..... of West Siang District, of  
State Arunachal Pradesh

Name Sri/Miss... **Tabok Yokung**

Sex Male/Female... **Male**

Date of Birth... **06/07/1984**

Name of Father/Mother... **T. Yokung**

Registration No... **376/93**

Date of Registration... **2/7/93**

Signature of Issuing authority  
**[Signature]** 2/7/93

Seal.

Date,