



FORM NO. 9

(See Rule 9)

GOVERNMENT OF ARUNACHAL PRADESH
DEPARTMENT OF ECONOMICS AND STATISTICS

Issued under section 12 } of the Registration of Birth
Issued under section 17 } and Deaths 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.....**Sakrin**.....of Tehsil.....**Thrizino Admin. Circle**
(Local area)

of District.....**West Kameng**.....

of State Arunachal Pradesh

Name.....**Miss Sante Desisow**.....

Sex.....**Female**.....

Date of Birth.....**8/3/88**.....

Place of Birth.....**Thrizino**.....

Name of Father/~~Mother~~.....**Srl. Tsering Desisow**
Vill-Sakin Po-Thrizino

PS Rupa

Signature of ~~Assisting Registrar~~

Seal **Registrar**

Date.....**of Births & Deaths**

West Kameng District

Thrizino

Arunachal Govt. Press—359/97-Dir.(Eco and Stat)-50,000-12-97.

Registration No.....**148**.....

Date of Registration ...**24/6/99**