



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) TAWANG of Tahsil TAWANG of District TAWANG of State ARUNACHAL PRADESH

Name PEM CHOJOM METOH

Sex FEMALE

Date of Birth 01-02-1988.

Place of Birth TSEKHAR

Name of Father SHRI LAMA WANGDI METOH

Name of Mother SMTI TOCHUNG

Registration No. TWG-491/2002.

Date of Registration 05-09-2002.

Date 5-9-02

Signature of issuing authority
Add. District Registrar of
Seal **Births & Deaths,**
Tawang District Tawang, (A.P.)