

(English Version)

FORM NO-7/8



**GOVERNMENT OF ODISHA**  
**DEPARTMENT OF HEALTH AND FAMILY WELFARE**  
**Cuttack Municipal Corporation**

**CERTIFICATE OF BIRTH**

*Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and Rules of Odisha*  
*Births and Deaths, Rule 2001*

This is to certify that following information has been taken from the original records of birth which is in the register for **Cuttack Municipal Corporation** of Tahasil **CUTTACK SADAR** of District **CUTTACK** of State **ODISHA**

Date of Birth.....**08/05/2019**..... Permanent Address.....**JAGATPUR, CUTTACK,**.....  
Sex.....**FEMALE**.....**ODISHA, INDIA, 754021**.....  
Name.....**AAMYRA MIRZA**.....  
Name of Father.....**MIRZA QAYUM BEG**..... Place of Birth.....**POPULAR NURSING HOME, CUTTACK**.....  
Name of Mother.....**SABINA PARWEEN**.....  
Date Of Registration.....**15/05/2019**..... Registration No.....**10430/2019**.....



**MR UMESH PANIGRAHI**  
Issuing Authority  
Registrar, Births & Deaths  
**CUTTACK MUNICIPAL CORPORATION**

**Date :18/06/2019**

Note: It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature. This certificate is issued as per section 4,5&6 of Information Technology Act 2000 and its subsequent amendments in 2008. For any query or verification, please visit <https://www.ulbodisha.gov.in>. Tampering of this certificate will attract penal action.