

(English Version)



FORM NO-7/8

ISSUE NO : 1605/2022

GOVERNMENT OF ODISHA  
DEPARTMENT OF HEALTH AND FAMILY WELFARE  
Bhawanipatna Municipal Council

**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 **Bhawanipatna Municipal Council** of Tahasil **BHAWANIPATNA**  
of District **KALAHANDI** of State **ODISHA**

Date of Birth..... **02/12/2018**

Permanent Address..... **AT-KADOPADA, PO-UTKELA,**

Sex..... **MALE**

**PS-KESINGA, KALAHANDI, ODISHA, INDIA**

Name..... **PRAYOUSH GAHIR**

Name of Father..... **GHANASHYAM GAHIR**

Place of Birth..... **DISTRICT HEADQUARTER HOSPITAL,**

Name of Mother..... **JAYANTI GAHIR**

**BHAWANIPATNA**

Date Of Registration..... **22/12/2018**

Registration No..... **7336/2018**



Signature valid

Digitally signed by MR BALAYA DEHURY  
Date: 2022.02.17 11:38:51  
IST  
Reason: Birth Certificate  
Location: BHAWANIPATNA

MR BALAYA DEHURY

Issuing Authority

Registrar, Births & Deaths

BHAWANIPATNA MUNICIPAL COUNCIL

Date :17/02/2022

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.birthdeathodisha.gov.in>. Tampering of this certificate will attract penal action.