Form-5

GOVERNMENT OF MEGHALAYA
DEPARTMENT OF HEALTH AND FAMILY WELFARE

Name of local body issuing certificate Smit PHC

BIRTH CERTIFICATE

Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969
and Rule 8/13 the Meghalaya Registration of Births and Deaths Rules, 1999

This is to certify that the following information has been taken from the original record of birth which is the register for (local area/ local body) Smit
of tahsil/block Mawryngkneng of District E. K. Hills
of the state of Meghalaya

Name Banteinam Mawkie sex Male

Date of birth 05-10-2002 Place of birth Home

Name of Mother Ibanrisha Mawkie

Name of Father Welcome Nongkhlaw

Address of parents at the time of birth of the child: Laitkok-I

Permanent Address of the parents: Same

Registration No: 553 Date of Registration: 28-08-2013

Remarks [if any]

Date of issue 30.8.13 Signature of the issuing authority

Address of the issuing authority

Seal

OFFICE OF THE REGISTRAR BIRTH & DEATH SMIT PHC EAST KHASI HILLS DATE

Registrar Of Births And Deaths
I/C Smit
CHC/PHC/ST Dispensary
East Khasi Hills.

"Ensure registration of every birth and death"

ted at the Directorate of Printing & Stationery, Shillong.

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