

No mo

Government of Tamil Nadu

Form No. 5

(See Rule - 8)

Department of Rural Development

This is to certify that the following information has been taken from the original record of **Birth** which is in the register for (Local Area) **PXXXXXXXX TXXXX PXXXXXXX** of Taluk **CXXXXXXXXXXX** of District **CXXXXXXXXX** of State **TXXXXXXXX**.

Name:	•	XXXX
Sex BIRTH CER	TIFICAT	- Female E
Date of Birth (Issued Under Section 12/XX of the Registra	:	XXXX
Place of Birth Rule 8 of Tamil Nadu Registration of	:	XXXX
		CUDDALORE
Name of the Father	:	хххх
Name of the Mother	:	хххх
Permanent Residential Address of the Parents	:	хххх
	:	хххх
		хххх
Registration No.	:	хххх
Date of Registration	:	10/04/2012
: 12/04/2012		
e Seal		

Registrar of Births and Deaths

Parangipettai Selection Grade Town Panchayat

Cuddalore District

Signature of the Issuing Authority