

## BIRTH CERTIFICATE

((ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE ASSAM REGISTRATION OF BIRTHS & 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 CIVIL HOSPITAL MANGALDAI OF TAHSIL/BLOCK MANGALDOI OF DISTRICT DARRANG OF STATE/UNION TERRITORY ASSAM, INDIA.

NAME / नाम : MAZIBAR RAHMAN

SEX / लिंग : MALE

AADHAAR NUMBER / आधार नंबर : XXXXXXXX 3784

DATE OF BIRTH / जन्म तिथि :

01-09-1995

FAST-SEPTEMBER NINTYN NINTY FIVE

PLACE OF BIRTH / जन्म स्थान :

MANGALDOI CIVIL HOSPITAL

NAME OF MOTHER / माता का नाम :

SAJEDA BEGUM

NAME OF FATHER / पिता का नाम:

MARFAT

AADHAAR NUMBER OF MOTHER / आधार नंबर: XXXXXXXX

AADHAAR NUMBER OF FATHER / आधार नंबर: XXXXXXXX

ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD /  
बच्चे के जन्म के समय माता-पिता का पता:

VILL MOUSITHA GASARGOR, PO BHAKATPARA, DARRANG ASSAM  
784190,

PERMANENT ADDRESS OF PARENTS / माता-पिता के स्थायी पता:

VILL MOUSITHA GASARGOR, PO BHAKATPARA, DARRANG ASSAM  
784190,

REGISTRATION NUMBER / पंजीकरण संख्या:

B-2024: 9-90347-006351

DATE OF REGISTRATION / पंजीकरण तारीख:

05-08-2025

REMARKS (IF ANY) / टिप्पणी (यदि कोई हो):

DATE OF ISSUE / जारी करने की तिथि:

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SIGNATURE OF ISSUING AUTHORITY / जारी करने वाला प्राधिकारी:

REGISTRAR (BIRTH & DEATH)

CIVIL HOSPITAL MANGALDAI

"ENSURE REGISTRATION OF EVERY BIRTH AND DEATH / प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें"