

True Translation from Urdu into English

Copy Register Birth No. \_\_\_\_\_ year \_\_\_\_\_ Police Station \_\_\_\_\_ District \_\_\_\_\_

ANNUAL REGISTE R NO.	DATE OF BIRTH	NAME IF ANY	SEX		NAME OF FATHER & GRAND FATHER	RESIDENCE OF FATHER	OCCUPATIO N, CASTE, & RELIGION OF FATHER	NAME OF INFORMER	DATE, MONTH YEAR IN WHICH BIRTH ENTERED	REAMRKS
			BOY	GIRL						
1	2	3	4		5	6	7	8	9	10

Name of Applicant:  
Date of Application:  
Date of Issue:  
Fee Charges Rs. \_\_\_\_\_  
No. \_\_\_\_\_/DBR dated \_\_\_\_\_.

Copied by.  
Sd/-XXX  
Dealing Clerk  
DHO Office,

Compared by.  
Sd/-XXX  
Head Clerk  
DHO Office,

Counter Signed  
Sd/-XXX  
District Health Officer,