

Form No. 10



THE CALCUTTA MUNICIPAL CORPORATION
HEALTH DEPARTMENT



80490



C E R T I F I C A T E O F D E A T H

As per format under Sections-12/Section-17 of the Registration of Birth and Deaths Act, 1969.

This is to certify that the following information has been taken from the original record of death which is in the Register for... M.S.C.T.D.

under The Calcutta Municipal Corporation (Local Area).

Registration No. 30

Name... Debutata Mazumder

Sex... M

Son/Wife of Lt. Kali Mazumder

Date of death 14-1-02

Date of Registration 14-1-02

Place of Death (Full Address)... Central Hospital G.R.C. S.E.R.I.Y. Cal

Residence... A/9, Rajlanya Nabapally P.O. Halti P.S. Kankla Cal - 78

Prepared by... S. R.

Head Assistant... S. R.

Dated... 14-1-02

Signature of the Competent Authority

Note—In the case of Death no disclosure regarding the cause of death as entered in the register is to be made (under sub-Section 17(1) of RBD Act, 69).

C. O. No. 11032001