

Form No.-10

THE CALCUTTA MUNICIPAL CORPORATION
HEALTH DEPARTMENT

16, S.N. Banerjee Road, Calcutta-700 013



No. 0301693

CERTIFICATE OF DEATH

Issued under Section-12/ Section-17 of the Registration of Births and Deaths Act, 1969.

This is to certify that the following information have been taken from the original record of death which are in the Register for

N.E.C.(T)

under The Calcutta Municipal Corporation (Local Area)

Name ASOK KUMAR DASGUPTA

Sex Male

Age of Not Applicable

Date of death 17/02/2002 Date of Regn. 17/02/2002 Registration No. 32

Place of death (full address)

N.R.S. Medical Coll. & Hospital, Cal.

Permanent Address

Not Applicable

Prepared by BC (comp. D1)

Date 29/04/2002

Registrar

Birth & Death

N.E.C. Health Dept

Signature of the Issuing Authority

No. 00050161

THE KOLKATA MUNICIPAL CORPORATION

HEALTH DEPARTMENT

5, S. N. Banerjee Road, Kolkata, 700 013

DEATH CERTIFICATE



[Issued under Sec. 12/ Sec. 17 of the Registration of Births and Deaths Act, 1969, Govt. of India and Rule 9/ Rule 14 Registration of Births and Deaths Rules 2000, Govt. of West Bengal]

[১৯৬৯ সালের কেন্দ্রীয় সরকারের অধীনস্থ নিবন্ধীকরণ আইনের ধারা ১২/ ধারা ১৭ এবং পশ্চিমবঙ্গ সরকারের নিয়ম ৯/ নিয়ম ১৪ অনুযায়ী]
This is to certify that the following information has been taken from the original record of death which is the register for Kolkata Municipal Corporation of Kolkata District of West Bengal

এই মর্মে নিশ্চিতভাবে জ্ঞাত করা যাচ্ছে যে নিম্নবর্ণিত বিবরণী মূল মৃত্যু পরিচয়পত্র থেকে নেওয়া হয়েছে। এটি মূল নিবন্ধীকরণের কলকাতা জেলায় কলকাতা পৌরসংস্থের মৃত্যু নিবন্ধের নিবন্ধন থেকে নেওয়া হয়েছে।

N. E. C. (T)

Name
নাম

SANKARI DAS GUPTA

Sex (M / F)
লিঙ্গ (পুং/মহ)

FEMALE

Age : 68 Y 0 M 0 D

Date of Death
মৃত্যুর তারিখ

04/11/2015

Place of Death
মৃত্যুর স্থান

N R S MEDICAL COLLEGE AND HOSPITAL, KOLKATA-14

Name of Mother
মাতার নাম

N/M

Name of Father
পিতার নাম

N/M

Name of Husband /Wife
স্বামী/স্ত্রীর নাম

W/O LATE ASHOK KUMAR DAS GUPTA

Address of the deceased at the
time of death
মৃত ব্যক্তির মৃত্যুকালীন ঠিকানা

DO

Permanent Address of the
deceased
মৃত ব্যক্তির স্থায়ী ঠিকানা

17, MOTIJHIL AVE. P.O. MOTIJHIL, P.S. DUM DUM
24PGS(N), 700074
W.B.

Registration No.
নিবন্ধীকরণ নং

HG015/2015/009558 (OLD REGN. NO:- 10845)

Date of Registration / নিবন্ধীকরণের তারিখ

04/11/2015

Remarks (if any)
মন্তব্য (যদি থাকে)

04/11/2015

Date of Issue
নির্দেশ জারির দিন

Signature of the Issuing Authority

Address of the Issuing Authority

উপনিয়ন্ত্রক কর্তৃপক্ষের ঠিকানা

Sub-Registrar

NIMTAH BURNING GHAT
The Kolkata Municipal Corpn

Ensure registration of every birth and death
প্রতি জন্ম ও মৃত্যু নিবন্ধীকরণ নিশ্চিত করা

NABADWIP MUNICIPALITY

Cremation Certificate of a Dead Body

This is to certify that the following informations have been gathered from the Register of deaths of the dead bodies whose death occurred outside Nabadwip Municipality and were cremated at the Nabadwip Burning Ghat.

- 1) Name: *A. Sunandan Dasgupta*
- 2) Sex: *Male*
- 3) Age: *68 years*
- 4) Date of Cremation: *23.11.93*
- 5) Date of Death: *23.11.93*
- 6) Name of father/mother/husband: *Late Benoy ranjan Dasgupta*
- 7) Permanent Address: *Maidanpur, Chapra, Nadia*
- 8) Date of Registration: *27.11.93*
- 9) Place of Death: *Maidanpur, Chapra, Nadia*
- 10) Registration No.: *3084*

3.5.94
Sanitary Inspector
Joint Inspector,
Licensing Authority
Secretary Births & Deaths
NABADWIP MUNICIPALITY



Countersigned

A. Dasgupta
Chairman

NABADWIP MUNICIPALITY

THE CALCUTTA MUNICIPAL CORPORATION**HEALTH DEPARTMENT**

0155717

5, S.N. Banerjee Road, Calcutta-700 013

**CERTIFICATE OF DEATH**

Issued under Section-12/ Section-17 of the Registration of Births and Deaths Act, 1969.

This is to certify that the following informations have been taken from the original record of death which is in the Register for

N.E.C.(T)

under The Calcutta Municipal Corporation (Local Area).

Name **HRISIKESH DASGUPTA**Sex **Male**Son of **Late G.G.Dasgupta**Date of death **30/01/93** Date of Regn. **30/01/93** Registration No. **30**

Place of death (full address)

Divine N. Home, Cal-10.

Permanent Address

**204, Bangur Avenue, El-A.
Cal-55.**Prepared by **BC (comp_D1)**Date **21/11/97**

[Signature]
Signature of the Issuing Authority