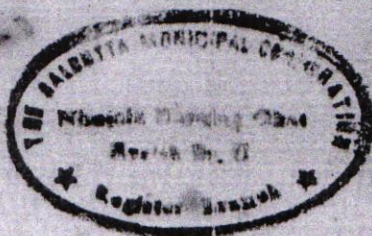


THE KOLKATA MUNICIPAL CORPORATION
HEALTH DEPARTMENT

PAUPER

64946



Form No.—6

(Sec Rule 9, W. B. Birth & Death Registration Rules)

DEATH CERTIFICATE

(Issued under Section 12/17 of R.B.D. Act 1969)

This is to certify that the following information has been taken from the original record of death which is the register for (Local Area)..... *NBG*
.....under Kolkata Municipal Corporation of District Kolkata of State West Bengal.

Name : *THAKUR DASI SARKAR*
Name of Father/Mother/Husband.
Sex : *Female*
Date of Death : *19/12/03.*
Place of Death : *N.R.S. HOSPITAL*
Registration No. : *11395/03/17*
Date of Registration : *19/12/03.*

Signature of issuing authority

Date..... *19/12/03.*



No Disclosure shall be made of particulars regarding the cause of death as entered in the Register. See proviso to Section 12/17.

C. P.—77—13-01-2003—75,000.