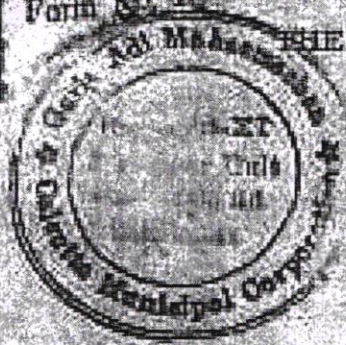
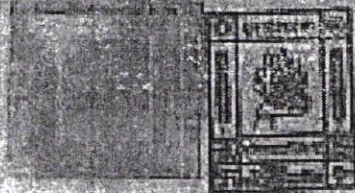


Form No. 10



THE CALCUTTA MUNICIPAL CORPORATION
HEALTH DEPARTMENT

REG. CO. 11



12949

CERTIFICATE OF DEATH

As per format under Section-12/Section-17 of the Registration of Births and Deaths Act, 1959.

This is to certify that the following information has been taken from the original record of death which is in the Register for..... **Garia Boring, GH.**

HG-5

under the Calcutta Municipal Corporation (Local Area).

Registration No. **E/397/T/20**

Name **Uma Pada Chakrabarty**

Sex **Male**

Son/Wife of **M. Matilal Chakrabarty**

Date of death **23/10/2001** Date of Registration **23/10/2001**

Place of Death (Full Address) **Bansarani place (Santa plati)**

P.O. - Bansarani, P.S. - Regent Park, Kolkata - 70

Residence **As above**

Prepared by.....

Head Assistant.....

Date **23/10/2001**



[Handwritten signature]

Signature of the Issuing Authority

[Handwritten signature]

Note - In the case of Death no disclosure regarding the 'cause of death' as required by law is to be made (under Sub-Section 17 (1) of RBD Act, 1959)

CC-14.03.2001-1,00,000.

SA Head.
Q.A.H.B. (JU) Br.
R.M.O.