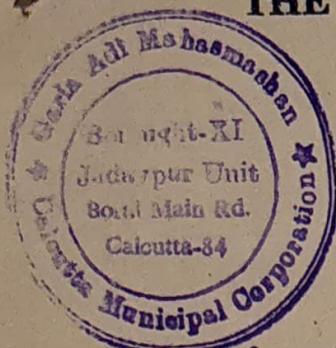


THE CALCUTTA MUNICIPAL CORPORATION HEALTH DEPARTMENT



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1570

CERTIFICATE OF DEATH

As per format under Section-12/Section-17 of the Registration of Births 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 **Garia Adi Mahasmanan JU Br-XI**.

under The Calcutta Municipal Corporation (Local Area).

Registration No. **E/129/07/119**

Name **Manoj Kumar Roy**

Sex **Female**

Son/Wife of **Usha Ranjan Roy**

Date of Death **18.4.01** Date of Registration **19.4.01**

Place of Death (Full Address) **Calcutta National Medical College & Hospital**

Residence **10, Chandra Roy, 2732 Garia, South Laskarpm, P.O. Laskarpm, P.S. Sonarpur, 24 Pgs (1)**

Prepared by

Head Assistant

Dated **19.4.01**

Signature of the Issuing 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, 1969).