

REPUBLIC OF KENYA
THE BIRTHS AND DEATHS REGISTRATION ACT (Cap. 149)

FORM D2

Serial No. D2A

657494

PERMIT FOR BURIAL

1. NAME OF DECEASED IM. MACULATE NELOYE F. UNANI
First Name Middle Name Father's or Husband's name

2. IDENTIFICATION / PASSPORT NUMBER 23172597

4. SEX Male ☐ Female ☒ 5. AGE 34 YRS 6. DATE OF DEATH 15/12/2017
Years Months Days Day Month Year

9. USUAL RESIDENCE KAMUNYONGIC - MACHAKOS SUB-LALATION BUNGOMA WEST
Sub-location or estate and town District

After making due inquiry as to cause of the death of the above named deceased person. I hereby authorize the interment of the body

17. DATE: 21 - 12 - 2017 18. REGISTRATION ASSISTANT FOR: ASSISTANT REGISTRAR 19. SIGNATURE [Signature]
Day Month Year (Name of Sub-location)

PERMIT ISSUED TO (Name) GEORGEY MUKUNA ID No. 438584 SIGNATURE [Signature]
Note — To obtain death certificate, present this permit to the District Registrar of Deaths where this death occurred.