Fee Paid Shs. LACKE

		)
	I	
	ス	
	james of	
ŀ	7	
	-	5
	D	<i>∠</i>
	1	
	-	
ı		)
	1	9
1	DI	J
	7	3
	)mm	
	-	

## BB/No. 0675847

													4
	н. А. МСНОРА	24/12/2010	24/9/2010	B.1 SIGNED BY TWAHA ABDE EMANI FATHER OF THE CHILD	TANZANIAN	PEASANT P.O.BOX 6 MTWARA	AMINA RASHIDI MNARID	TANZANIAN	DRIVER P.O.BOX 6 MTWARA	TWAHA ABDEREHMAN I	FEMALE	DARIN	LIGULA HOSPITAL MTWARA
(15)	(14)	(13)	(12)	REH	(10)	(9)	(8)	(7)	(6)	(5)	(4)	(3)	(2)
added or altered after registration of birth	Signature of registering officer	Date of registration	Date of Birth	Signature, description and residence of informant	Mother's Nationality	Mother's occupation and residence	Name and maiden name of mother	Father's Nationality	Father's occupation and residence	Name and Surname of father	Sex	Name if any	Where

MSAJILI WAVIZAZI NAVIFO WILAYA

A DISTRICT REGISTRAR