

B N° 0322305


THE UNITED REPUBLIC OF TANZANIA

CERTIFICATE OF BIRTH

No. of entry	Where born	Name if any	Sex	Name and Surname of father	Father's Occupation and residence	Father's Nationality	Name and maiden name of mother	Mother's occupation and residence	Mother's Nationality	Signature, description and residence of informant	Date of Birth	Date of registration	Signature of registering officer	Baptismal name if added or altered after registration of birth
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)
16/2001	MISSION HOSPITAL KINONDONI DAR ES SALAAM	LINDA FEMA	FEMALE	RAPHAEL SAMUEL SALLU	UPANGA ILALA DAR ES SALAAM	CITIZEN OF TANZANIA	JANE D/O GAMALIEL LUVANDA	CLERK UPANGA DAR ES SALAAM	CITIZEN OF TANZANIA	SGD. JANE EMALIEL LUVANDA MOTHER OF CHIL D	TWENTY SECOND JANUARY 2001	FIRST FEBRUARY 2001	SGD.V.M. KONDO	

Certified under the Births and Deaths Registration Ordinance (Cap.108 of the Laws), to be a true copy of an entry in the register in my custody of Births for the District ofKINONDONI.....in Tanzania.

Dated this.....24th.....day ofMARCH.....2003


DISTRICT REGISTRAR

DISTRICT REGISTRAR OF
BIRTHS AND DEATHS
KINONDONI

Fee Paid Shs. 250/=