

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
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
MOUNT MERU HOSPITAL ARUSHA	KENEH	MALE	EMANUEL MAWERE	W/SHOP SUPERVISOR ARUSHA	TANZANIAN	THERESIA D/O ROBERT	CLERK ARUSHA	TANZANIAN	AS PER APPLICATION IN WRITING FORM BD 15A SIGNED BY EMANUEL MAWERE FATHER OF THE CHILD OF ARUSHA	SIXTEENTH APRIL, 1987	TWENTIETH APRIL, 2009	S.D: Y.S. MATEU

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 ..... ARUSHA ..... in Tanzania.

Dated this ..... 23RD ..... day of ..... APRIL.

Paid Shs. 2,000/=

DISTRICT REGISTRAR OF BIRTHS AND DEATHS  
ARUSHA