

BB/N_{o.} 0657083

CERTIFICATE OF BIRTH

ED REPUBLIC OF TANZANIA

Where born	(2)	RUANDA HEALTH CENTRE	Name if any	(3)	CIARA	Sex	(4)	FEMALE	Name and Surname of father	(5)	SAULO KASTOR KAPINGA	Father's occupation and residence	(6)	UYOLE AREA MBEYA DISTRICT	Father's Nationality	(7)	CITIZEN OF TANZANIA	Name and maiden name of mother	(8)	OTILIA D/O SABINUS MBELE	Mother's occupation and residence	(9)	UYOLE AREA MBEYA DISTRICT	Mother's Nationality	(10)	CITIZEN OF TANZANIA	Signature, description and residence of informant	(11)	SGD. BY O. S. MBELE MOTHER OF CHILD UYOLE AREA MBEYA DISTRICT	Date of Birth	(12)	THIRTY FIRST MARCH 2010	Date of registration	(13)	NINTH JUNE 2010	Signature of registering officer	(14)	SGD: NTHANGU D. M.	Baptismal name if added or altered after registration of birth	(15)	
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I 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

MBEYA

Dated this day of 2010

MBEYA

Paid Shs. 2,000/=

DISTRICT REGISTRAR OF BIRTHS/DEATHS
MBEYA

DISTRICT REGISTRAR