-	0	7	0
	C	1	0
1	9	_	0
	0	400	0
1	0	-	U
	0	X	0
	9	100	0
	()	
	-	7	-
	a		-
			_
	۵	ĭ	3
	_		

VITED R	REPUBLI	00	NITED REPUBLIC OF TANZANIA		CE	RTIFICA	CERTIFICATE OF BIRTH	RTH					
Where	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 registra- tion	Signature of registering officer	Baptismal name if added or altered after registration of birth
(2)	(3)	(4)	(5)	(9)	(0)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	, (15)
META MATERNITY HOSPITAL	AICLOR	SIAM	OBEDI	TEACHER (SECONDARY) NONDE AREA MBEYA DISTRICT	CITIZEN OF TANZANIA	LUCIA D/O JAMSI MWANASENGA	CIERK PISTRICT	CITIZEN OF TANZANIA	MEETA DISTRICT MOUDE AREA MOUDE AREA SIGNED BY LJ. MWANASENGA	TWENTY SIXTH OCTOBER 2004	FOURTEENTH DECEMBER 2004	NTHANGU D.M.	
Sertified un District of	inder the B	e Births	Sertified under the Births and Deaths Registration Ordinance (Cap.1 District of	gistration C ınzania.	rdinance ((f the Laws). Dated th	Dated this TWENTYELGHTH	ue copy of an en	entry in t	the registe	ster in my cust	08 of the Laws), to be a true copy of an entry in the register in my custody of Births Dated this. TWENTYELGHTHday of DECEMBER XXX 2004.

DIMETRICT REGISTRAR OF BIRT SIDEATHS MBEYA

DISTRICT REGISTRAR

d Shs. 250/=