E UNITED REPUBLIC OF TANZANIA

CERTIFICATE OF BIRTH

No.	Where	Name if any	Sex	Name and sarname 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, descrip- tion and residence of informant	Date of birth	Date of registra- tion	Signati re of registering officer	Baotismal name if added or altered after segistration of birth
entry (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	15
7175/83	MUHIMBILI MEDICAL CENTRE DAR ES SALAAM	PETER	MALE	GODIANI MAPANGO	CLERK (NASACO) 12 KARIAKOO AREA DAR ES SALAAM	CITIZEN OF TANZANIA	MARY D/O MARTINI	CLERK (POSTA) 12 KARIAKOO AREA DAR ES SALAAM	CITIZEN OF TANZANIA	AS PER NOTIFICATION OF BIRTH IN WRITING DATED 13TH JUNE 1983 AND SIGNED BY G. MAPANGO FATHER OF 12 KARIAKOO AREA	WENTY NINT	THIRTREBUTH JUNE 1985	SGD. C.O. KAISI	

Certified under the Births and Death's Registration Ordinance (Cap. 108 of the Laws), to be a true Copy of an entry in the register in my custody of Births

The District of DAR ES SALAAM in Tanzania.

Dated this 29TH day of 108 of the Laws)

Fee paid Shs. 5/-

Asst. District Registrar

AAL.