1			No				1						
Where	Name if any	Sex	Name and surname of father	Pather's occupation and residence	Pather'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			Baptismal sar added or sitered
2	9	3	9	6	Э	(8)	9	(10)	(CL)	3	8	9	(SI)
ARUNEL FOR MORNE HOSPITAL  KALVIN  MALE  CYPRIAN .J. MATTA  BARREN  ARUSHA  CIPI ZEN OF TANZARA  EDITH PAPTALEO SIRILI  POTTA ARUSHA	ELT AIN	AE .	CYPRIAN .J. MATEL	ARE MA	OPPIZER OF TANZLES	CDITH PARTILEO SIRILI	POTTA RUSHA	TTTZEZ OF TANZANIA	O PER APPLICATION IN HRITTE DI FORM BD I5 DATED AND IGNED EDITH PANTALEO CIRILI FORMER OF THE CHILD, ARUCHA	SECOND DECEMBER, 1994	PIFTH JANUARY,1990	IONED BY .F.MOLLEL ITTRICT RECISTRAS ASSESSA	

aid Shs. 250/-

Dated this .....day of .....

DISTRICT REGISTRAD OF REPTRACEATE

District Registra