REPUBLIC OF KENYA

THE BIRTHS AND DEATHS REGISTRATION ACT (Cap. 149) ACKNOWLEDGEMENT OF BIRTH NOTIFICATION (FOR PARENTS)

| Se | rial No. B1 AA | | | | 3 | JP31 | Ti Ci |
|---------|------------------------|------------------------------|------------------|--|-----------------------|-------------------------|-----------|
| 1. | FLENA | WANDI | | NJAG | 05 | OF BIRTH | 2024 |
| _ | First name | Other nam | | Father's name | - | Month | Year |
| 3. _ | SEX* Male Female | 4. TYPE OF Single | Twin MEDICA | NAIROBI H L RECORDS D OX 30026 - 001 | IOSPITAL EPARTMENT | JRE OF BIRT | H* n Dead |
| 7. _ | PLACE OF BIRTH Sub-loc | MAROG cation or Estate an | d Town or health | 9X 30026 - 001 | 00, NAIROBI 45680 | MAIR | 061 |
| 8. | NAME OF MOTHERF | ISTIME | 5 LA | Iiddle name | K | 00 H \ 0 Father's na | nme |
| N | OTIFICATION ISSUED TO | IUSTINE | SIANOI | KOOMYO | ID No. 2L | + H235 | 11 |