



CANTONMENT BOARD SHILLONG
SHILONG CANTONMENT



Registrar of Birth & Death.
(Form No.13)

BIRTH CERTIFICATE

NO.

Date:

1. Name of the new born child if any :
2. Date and time of Birth :
3. Sex :
4. Name of Father :
5. Name of Mother :
6. Race/Religion :
7. Date of Registration :
8. Place of Birth :
9. Particulars of person intimating the birth :

Copied by:-

Checked by:-

Registrar of Birth & Death
Chief Executive Officer



CANTONMENT BOARD SHILLONG
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Registrar of Birth & Death.
(Form No.13)

DEATH CERTIFICATE

NO.

Date:

Date of Registration :

Date of Death :

Name :

Name of Father/Husband :

Place of Death :

Age :

Sex :

Occupation :

Religion :

Nationality :

**Permanent Residential
Address** :

Cause of Death :

Name of the informant :

Registrar of Birth & Death
Chief Executive Officer