BIRTH REPORT FORM

RAWALPINDI CANTONMENT

Enter

CEO

1. Date of Birth of Child _____
2. Place of Birth alongwith complete address _____

_____

3. Name of Child _____
4. Sex of the child (Male/Female/Eunuch) _____

Name of child's Mother and her identity card No.

5. Name of mother with her father's Name

Name of Mother _____

Daughter of _____

6. Identity card code No. of mother

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Name of child's Father and his identity card No.

7. Name of father with his father's Name

Name of Father _____

Son of _____

8. Identity card code No. of father

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9. Age of mother at the time of birth _____
10. No. of children born alive to the mother so far _____
11. Date of registration of birth _____
12. Name and address of the _____

    Dai attended _____
13. Signature of the Reporter

    with full address _____

_____