

THE KOLKATA MUNICIPAL CORPORATION

HEALTH DEPARTMENT

5, S. N. Banerjee Road, Kolkata-700 013.



No. 0500332

FORM 6

DEATH CERTIFICATE

(FREE COPY)

(Issued u/s 12/17 of the RBD Act. 1969 and Rule 9/14 of the WBRBD Rules 2000)

M.G.E.C. (T)

This is to certify that the following information has been taken from the original record of death which is the register for (Local Area - Kolkata) District - Kolkata of State - West Bengal.

Name of the deceased : ARCHANA KUMAR

Sex (Male / Female) : FEMALE

Age : 63 Y 0 M 0 D

Date of Death : 13/02/2014

Place of Death : 44/1A&B, D.H. RD., PS. - EKBALPUR, KOLKATA-700027

Name of Father / Husband of the deceased : W/O AJIT CHANDRA KUMAR

Name of Mother of the deceased : N/A

Address of the deceased at the time of death : N/A

Permanent Address of the deceased : 44/1A&B, D.H. RD., PS. - EKBALPUR, KOLKATA-700027

W.B.

Registration No. : HG011/2014/002542 (OLD REGN. NO:- T2599)

Date of Registration : 13/02/2014

Date : 13/02/2014

Signature of the Issuing Authority
 SUB-REGISTRAR
 SHANAGORE
 BURNING GHAT
 K. M. C.