CERTIFICATE OF AGE

This is to certify that I examined Sri./Smt			• • • • • • • • • • • • • • • • • •	• • • • •	
	residing in				•
Village / town		dist.	According	to	the
observations made by me, he/she about		Yea	rs old.		

Identification marks

2).....

1).....

Thumb impression/ Sign of the applicant

Station:-

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Tala Bar

T. Same

Date:-

Signature of the Medical officer