BEFORE THE REGISTRAR OF BIRTHS & DEATHS _____

AFFIDAVIT

Ι,	S/o W/o	aged
	R/o	
do ł	nereby solemnly affirm and st	ate an oath as follows:-
1. I submit that my husban due to, k husband/wife to the concerne procedure. Hence, this sworn and Deaths of Municipalities A and for issue the certificate to t	d authorities due to over affidavit giving particulars ur ct for recording the same in	vent of the death of my sight and ignorance of nder Sec.13(2) of Births
 Date of death Full name of deceased Name of the father/husband Place of death (with details) Age Sex. Male/Female Marital status Occupation Religion Nationality Permanent residential address. 		
12. Cause of death	:	
13. Whether medically Certified (yes/No)	:	
14. Kind of medical attention received, if any.	:	
15. Informant's		
i) Name ii) Address	:	

ii) Address

On the above information, the even of death of my husband/wife may be 2. recorded in the concerned records and issue a certificate to that effect.

The above facts are true and correct to the best of my knowledge and belief.

DEPONENT VERIFICATION:- Solemnly affirmed and signed before me by the deponent admitting the contents of this affidavit on _____at _____at _____.

NOTARY