Translation of Birth Report

Child's full name:		
Sex: Male / Female		
Date of Birth:		-
Place of Birth:		
Father's Name:		
Nationality:		
Mother's Name:		
Nationality:		
Date birth was reported to city office:		
Name and position (e.g. father, mother, physician)	1 1 0	
Ward/city office where birth report is filed:		
This is to certify that the foregoing report was acce	pted on	
Date:	Name:	(Seal)
	Title:	
I certify that the foregoing is a correct translation.	·	
Translator's signature:		
Translator's name and date:		