CHANDIGARH ADMINISTRATION AFFIDAVIT

(Correction in the Birth Report)

I,	S/o
Resident of	do hereby solemnly
Affirm and declare as under:	
1. That a male /female child was born to my Mrs.	
w/o Resident o	of [
On in	Chandigarh (Name of Hospital).
2. That the Name of the father/mother	
of the Male C Female C Child wrongly beer	n/has been Mentioned as
	(per nick name).
3. That the Name of the father/mother mentioned	as at
The hospital record is only his/her pet/nick Name.	
4. That the correct and full name of the father/mot	her
of the Male \(\) Female \(\) Child is (are) are	
5. That Mrs. / Sh.	is known by
Both the Names a	lias in her/his family.
6. That there is not person Named	in his family
7. That the male/female child born on	has neither been adopted or

v/o	s/o		
Place		Dated	
DEPONENT			
Verification:	 		
The contents of the above standard thing has been concealed the	and correct to the bes	t of my knowledge	and belief and
DEPONENT			