

CERTIFIED COPY of an Pursuant to the Births and



ENTRY OF DEATH Deaths Registration Act 1953

Registration District

1 . Death in the Sub-district of

in the

Columns: -		1	2	3	4	5	6	7	8	9
No.	When and where died	Name and surname	Sex	Age	Occupation	Cause of death	Signature, description, and residence of informant	When registered	Signature of registrar	
										Registrar

Certified to be a true copy of an entry in a register in my custody.

SPECIMEN
Superintendent Registrar

.....
Date

CAUTION: THERE ARE OFFENCES RELATING TO FALSIFYING OR ALTERING A CERTIFICATE AND USING OR POSSESSING A FALSE CERTIFICATE. © CROWN COPYRIGHT

WARNING: A CERTIFICATE IS NOT EVIDENCE OF IDENTITY.