

**FORM No. 13 (See rule 14)**

**SUMMARY MONTHLY REPORT OF STILL BIRTHS**

1. Report for the Month of: \_\_\_\_\_ Year : \_\_\_\_\_
2. District:
3. Town/ Village:
4. Registration Unit:
5. Number of Still Births Registered during the month:

(1) Male	(2) Female	(3) Transgender Person	Total* (1+2+3)

6. Time Gap in Birth registration:
  - Within Time limit (21 days) of their occurrence:
  - More than 21 days but within 30 days of their occurrence:
  - More than 30 days but within one year of their occurrence:
  - After one year of their occurrence:

Total\* (a + b + c + d):

\* Total should be equal to the number of statistical part of Still Birth Report Forms (Form No.1) attached with this monthly report.

Signature and Name of the Registrar.

Date :

d	d	-	m	m	-	y	y	y	y
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Submitted to the Chief Registrar/District Registrar