

MINISTRY OF GENDER, SPORTS, CULTURE AND SOCIAL SERVICES.  
DEPARTMENT OF SOCIAL SERVICES



REPUBLIC OF KENYA

**CERTIFICATE FOR REGISTRATION**

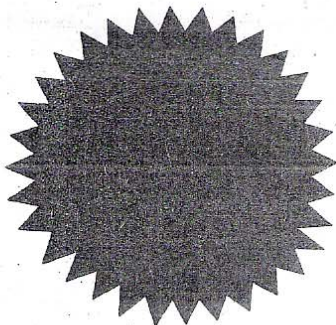
This is to certify that ..... CHAKAMA ORPHANS CENTRE SELF HELP GROUP ..... Group  
of ... CHAKAMA ..... Location ... MALINDI ..... Division has  
been registered with Department of Social Service Reg. No. ... SS/MLD/CD/64/2008 .....  
On this day ... THURSDAY ..... Date ... 6TH ..... Of the month of  
..... MARCH ..... Year ..... 2008 .....

**ACTIVITIES OF THE GROUP**

- i. .... FARMING .....
- ii. .... LIVESTOCK KEEPING .....
- iii. .... POULTRY .....
- iv. .... SUPPORT CHILDREN EDUCATION .....
- v. .... COMMUNITY MOBILISATION ON EDUCATION .....
- vi. ....

The group can be de-registered if it is found engaged in activities not mentioned above or fails to submit progress report.

The group will be renewed after every one year of existence



Sign: .....  
District Social Development Office  
MALINDI  
COMMITTEE

The certificate was issued without any erasar or alteration whatsoever.