





No. 1016352

**PERAKUAN PENGAMAL PERUBATAN**  
**CERTIFICATION BY MEDICAL PRACTITIONER**

Akta Pendaftaran Kelahiran dan Kematian 1957  
 Kaedah-Kaedah Pendaftaran Kelahiran dan Kematian 2019  
 (Subseksyen 22(1); Kaedah 9)

*Births and Deaths Registration Act 1957*  
*Births and Deaths Registration Rules 2019*  
 (Subsection 22(1); Rule 9)

Saya / I

DR LIYANA BINTI ROSLAN (941004-04-5332)  
 (Nama dan Nombor Kad Pengenalan Pegawai Perubatan /  
 Name and Identity Card No. of the Medical Officer)

mengesahkan bahawa saya telah merawat / affirm that i have attended:

Nama si mati / Name of the deceased ..... A. BAKAR BIN SUKADI

Nombor pengenalan si mati / Identification no. of the deceased ..... 491005-01-5531

Alamat si mati / Address of the deceased ..... 83B 27, JG BALANG BEJAR 83610  
MUAL JOHOR

semasa penyakit terakhirnya pada / during his last illness on ..... 18/5/2022

dan beliau telah meninggal dunia pada / and he passed away on ..... 18/5/2022

(tarikh / date) ..... 136 @ ..... (masa / time).

Sebab-sebab utama kematian ialah / The main causes of death are:

SEVERE IMMUNITY ACQUIRED PNEUMONIA

DR. LIYANA BINTI ROSLAN  
 MBB (UJIM)  
 No. Pendaftaran Perubatan: 94260  
 Pegawai Perubatan  
 Hospital Pakar Sultanah Fatimah  
 Muar, Johor

(Tandatangan dan cap rasmi / Signature and official seal)

Tarikh / Date: ..... 18/5/2022

**NOTA**

Borang ini untuk kegunaan pegawai perubatan berdaftar bagi memperakui sebab-sebab kematian seseorang semasa penyakit terakhir dirawat oleh pegawai perubatan itu.

**NOTE**

This form is to be used by registered medical practitioner to certify the causes of death of any person who has during his last illness been attended by such medical practitioner.