

STATE OF NEW JERSEY

40003612863

# CERTIFICATE OF BIRTH

NAME OF CHILD  
**Shubham Shrikant Devre**

DATE OF BIRTH  
**January 31, 2008**

TIME OF BIRTH  
**2:01 PM**

SEX  
**MALE**

MAIDEN NAME OF MOTHER  
**Smita Anand Vadnere**

NAME OF FATHER  
**Shrikant Pramod Devre**

PLACE OF BIRTH  
**GALLOWAY**

COUNTY OF BIRTH  
**ATLANTIC**

DATE ISSUED:  
**February 13, 2008**

FILE NUMBER

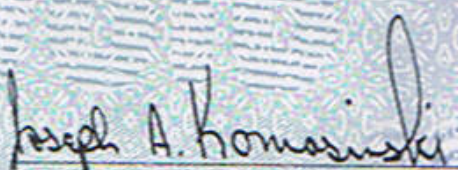
DATE FILED WITH REGISTRAR: **February 5, 2008**


AMENDED DATE:

ISSUED BY:  
**GALLOWAY TOWNSHIP  
REGISTRAR OF VITAL STATISTICS  
LISA A. TILTON, ACTING TWP. CLERK**

This is to certify that the above is correctly copied from a record on file in my office.

Certified copy not valid unless the raised Great Seal of the State of New Jersey or the seal of the issuing municipality or county, is affixed hereon.

  
Joseph A. Komosinski, State Registrar  
Bureau of Vital Statistics



REG-42A  
JULY 04

THIS DOCUMENT CONTAINS A UNIQUE STATE OF NJ WATERMARK

THIS DOCUMENT HAS MULTIPLE SECURITY FEATURES TO DETER FRAUD; VOID IF ALTERED