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**State Of New Jersey**  
**New Jersey Office of the Attorney General**  
**Division of Consumer Affairs**

THIS IS TO CERTIFY THAT THE  
**Occupational Therapy Advisory Council**

**HAS LICENSED**

**Swapna P. Bollera**  
**21 Moraine Road**  
**Edison NJ 08820**

**FOR PRACTICE IN NEW JERSEY AS A(N): Occupational Therapist**

**09/20/2021 TO 09/30/2023**  
**VALID**

**46TR00221700**  
**LICENSE/REGISTRATION/CERTIFICATION #**

Signature of Licensee/Registrant/Certificate Holder

*[Signature]*  
**ACTING DIRECTOR**

New Jersey Office of the Attorney General  
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**ACTING DIRECTOR**

PLEASE DETACH HERE  
IF YOUR LICENSE/REGISTRATION/  
CERTIFICATE ID CARD IS LOST

PLEASE NOTIFY:

Occupational Therapy Advisory Council  
P.O. Box 45037  
Newark, NJ 07101

PLEASE DETACH HERE