

CERTIFICATE OF VITAL RECORD

VERIFY PRESENCE OF WATERMARK

HOLD TO LIGHT TO VIEW

**The Commonwealth of Massachusetts
City of Melrose
Office of the City Clerk**

021850

COPY OF RECORD OF BIRTH

REGISTERED NUMBER: 188

CHILD

Name: **ROSHAN S. KHATRI**
Date of BIRTH: **FEBRUARY 13, 2004** Time: **12:45 AM**
Sex: **MALE**
Place of Birth: **MELROSE, MA**

MOTHER

Name: **ALPA S. KHATRI**
Maiden surname: **PARMAR** Date of BIRTH: **DECEMBER 20, 1977**
Birthplace: **CHIKHLI, INDIA**
Residence: **MALDEN, MA**

FATHER

Name: **SANDIPKUMAR GAMANLAL KHATRI**
Birthplace: **NAVSARI, INDIA**
Date of BIRTH: **NOVEMBER 19, 1977**

Date of RECORD: **FEBRUARY 24, 2004**

Mary-Rita O'Shea

**MARY-RITA O'SHEA
CITY CLERK**

I, the undersigned, hereby certify that I am the City Clerk of the City of Melrose; that as such I have custody of the records of birth, marriage, and death required by law to be kept in my office; and I do hereby certify that the above is a true copy from said records.

IT IS ILLEGAL TO ALTER OR REPRODUCE THIS DOCUMENT IN ANY MANNER

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED