

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

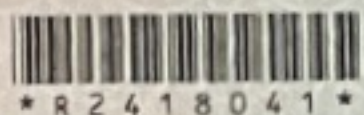
COUNTY of SANTA CLARA

SAN JOSE, CALIFORNIA

1202143017843

CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA USE BLACK INK ONLY

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER			
THIS CHILD	1A. NAME OF CHILD - FIRST DEVANSH	1B. MIDDLE -	1C. LAST TRIPATHI		
	2. SEX MALE	3A. THIS BIRTH SINGLE, TWIN, ETC. SINGLE	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC. -	4A. DATE OF BIRTH - MM/DD/YYYY 10/14/2021	4B. HOUR - 24 HOUR CLOCK TIME 0723
PLACE OF BIRTH	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY EL CAMINO HOSPITAL		5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION 2500 GRANT RD		
	5C. CITY MOUNTAIN VIEW		5E. COUNTY SANTA CLARA		
MOTHER	6A. NAME OF PARENT - FIRST PRANAV	6B. MIDDLE -	6C. LAST - BIRTH NAME TRIPATHI	6D. <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT	7. BIRTHPLACE - STATE/COUNTRY INDIA
	8. DATE OF BIRTH 12/01/1988				
FATHER	8A. NAME OF PARENT - FIRST RASHMI	8B. MIDDLE -	8C. LAST - BIRTH NAME DIXIT	8D. <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT	9. BIRTHPLACE - STATE/COUNTRY INDIA
	10. DATE OF BIRTH 08/20/1988				
INFORMANT AND BIRTH CERTIFICATION	13A. PARENT OR OTHER INFORMANT - SIGNATURE AMIKA CHAND		13B. RELATIONSHIP TO CHILD BIRTH CLERK	13C. DATE SIGNED 10/20/2021	
	13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE ANGELA LABITAD, BIRTH CLERK		13B. LICENSE NUMBER A105976	13C. DATE SIGNED 10/21/2021	
13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT VIDYA NITIN MHAMUNKAR, MD 2495 HOSPITAL DRIVE, MOUNTAIN VIEW, CA 94040			14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT ANGELA LABITAD, BIRTH CLERK		
15A. DATE OF DEATH - MM/DD/YYYY	15B. STATE FILE NO. - STATE USE ONLY	15. LOCAL REGISTRAR - SIGNATURE SARA H. CODY, MD		17. DATE ACCEPTED FOR REGISTRATION - MM/DD/YYYY 10/28/2021	



CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF SANTA CLARA
This is a true and exact reproduction of the document
officially registered and placed on file in the Office of the
Santa Clara County Clerk-Recorder.

Regina Alcomendras
REGINA ALCOMENDRAS
COUNTY CLERK-RECORDER

DATE ISSUED **NOV 09 2021**

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE