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JULY 59

STATE OF NEW JERSEY

STATE DEPARTMENT OF HEALTH **DIVISION OF VITAL STATISTICS AND ADMINISTRATION**

Trenton, N. J., May 8, 1962

This is to Certify that the folbwing is correctly cop ied from a record of Birth in my office. DO NOT ACCEPT THIS CERTIFICATE UNLESS THE RAISED SEAL OF THE STATE DEPARTMENT OF HEALTH IS AFFIXED HEREON.

NAME OF CHILD	SEX	PLACE OF BIRTH	DATE OF BIRTH
Serge Caleca	Male	Venice, Italy	October 17,1958

(By Adoption) NAME OF FATHER	MAIDEN NAME OF MOTHER
Vincent Caleca	Rose Lucy Petrillo

NOTE—An original certificate filed within one year after the date of birth does not bear the date of receipt by the State. No date will appear upon the "Date filed" line below unless the birth was reported later than one year after it occurred.

Date filed.....

F. Merton Saybolt M. S. P. H. Roscoe G. Kindle M.D.

State Registrar of Vital Statistics — State Commissioner of Health

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Paul R. Hartmann
BERGEN COUNTY CLERK