THE CITY OF NEW YORK
VITAL RECORDS CERTIFICATE

CERTIFICATE OF BIRTH REGISTRATION

DATE FILED: NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE 2006 MAY 30 A 9:19

CERTIFICATE OF BIRTH

Birth No. 156-06-047334

1. FULL NAME OF CHILD	First Name: ELIEZER	Middle Name: YEHUDA	Last Name: KIRSCHNER
2. SEX: Male	3a. NUMBER DELIVERED of this pregnancy: 1 3b. If more than one, number of this child in order of delivery:	4a. DATE OF CHILD'S BIRTH (Month) (Day) (Year): May 25, 2006	4b. HOUR: 03:14 AM
5. PLACE OF BIRTH	5a. NEW YORK CITY BOROUGH OF: Brooklyn	5b. Name of Facility (if not in institution, street address): Maimonides Medical Center	5c. TYPE OF PLACE: Hospital
6a. MOTHER'S FULL MAIDEN NAME: YITTY KLEIN		6b. MOTHER'S DATE OF BIRTH (Month) (Day) (Year): 01/02/1970	6c. MOTHER'S BIRTHPLACE City & State or foreign country: Brooklyn, NY
7. MOTHER'S USUAL RESIDENCE a. State: NY b. County: Kings	7c. City, town, or location: New York	7d. Street and house number: 1298 East 34th Street Zip: 11210	7e. Inside city limits of 7c? Yes
8a. FATHER'S FULL NAME: CHAIM KIRSCHNER		8b. FATHER'S DATE OF BIRTH (Month) (Day) (Year): 06/27/1967	8c. FATHER'S BIRTHPLACE City & State or foreign country: Brooklyn, NY
9a. NAME OF ATTENDANT AT DELIVERY: Jack Troper, M.D.		9b. I CERTIFY THAT THIS CHILD WAS BORN ALIVE AT THE PLACE, DATE AND TIME GIVEN Signed: M.D. Name of Signer: Jack Troper Address: 5925 15 Avenue, Brooklyn, NY 11219 Date Signed: 5/25 Year: 2006	
Information added or amended (Reason) Date / City Registrar			

VITAL RECORDS — DEPARTMENT OF HEALTH AND MENTAL HYGIENE — THE CITY OF NEW YORK

YITTY KIRSCHNER
1298 East 34th Street
Brooklyn NY 11210

MOTHER'S MAILING ADDRESS
Copy of this certificate will be mailed to her when it is filed with the Department of Health and Mental Hygiene.

Above is a Certificate of Birth Registration for your child, which is sent without charge. The Department of Health and Mental Hygiene does not certify to the truth of the statements made thereon, as no inquiry as to the facts has been provided by law. If the certificate contains any errors it is important to have them corrected as soon as possible. You may call (212) 788-4520 for information. Or, you may write to the Corrections Unit, Office of Vital Records, 125 Worth Street - CN4, New York, New York 10013. Forms and instructions are also available on the Department of Health and Mental Hygiene's Web site: www.nyc.gov/health

MAYOR — COMMISSIONER OF HEALTH AND MENTAL HYGIENE — CITY REGISTRAR

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