## CERTIFICATION OF BIRTH

This is a certification of name and birth facts on file in the Office of Vital Records, Department of Health and Mental Hygiene, City of New York.

DATE OF BIRTH

**APRIL 10, 2015** 

156-15-031402

MANHATTAN

04-15-2015

DATE

07-15-2015

NAME:

SELICA

SEX:

FEMALE

MOTHER/PARENT'S NAME: SACHIE

ITO

FATHER/PARENTS NAME: DEREK

CHOW

Steven P. Schwartz, Ph. B. City Registrar



Do not accept this transcript unless it bears the security features listed on the back. Reproduction or alteration of this transcript is prohibited by §3.19(b) of the New York City Health Code if the purpose is the evasion or violation of any provision of the Health Code or any other law.



