

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

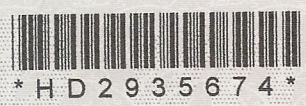
COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY

1201119094131
LOCAL REGISTRATION NUMBER

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER			
THIS CHILD	1A NAME OF CHILD - FIRST RYAN		1B MIDDLE HARUSHIGE		1C LAST YAMADA
	2 SEX MALE	3A THIS BIRTH SINGLE, TWIN, ETC SINGLE		3B IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC -	4A DATE OF BIRTH - MM/DD/CCYY 10/07/2011
PLACE OF BIRTH	5A PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY PROVIDENCE LCM-TORRANCE		5B STREET ADDRESS - STREET AND NUMBER, OR LOCATION 4101 TORRANCE BLVD		
	5C CITY TORRANCE		5D COUNTY LOS ANGELES		
FATHER/PARENT	6A NAME OF FATHER/PARENT - FIRST SHUJI	6B MIDDLE MITCHELL	6C LAST YAMADA	7 BIRTHPLACE - STATE/COUNTRY CA	8 DATE OF BIRTH - MM/DD/CCYY 06/06/1963
MOTHER/PARENT	9A NAME OF MOTHER/PARENT - FIRST LORI	9B MIDDLE AKEMI	9C LAST - BIRTH NAME WATANABE	10 BIRTHPLACE - STATE/COUNTRY CA	11 DATE OF BIRTH - MM/DD/CCYY 10/18/1970
INFORMANT AND BIRTH CERTIFICATION	12A PARENT OR OTHER INFORMANT - SIGNATURE <i>[Signature]</i>		12B RELATIONSHIP TO CHILD <i>Mother</i>		12C DATE SIGNED - MM/DD/CCYY 10/11/2011
	13A ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE <i>Nicole Weber Supervisor</i>		13B LICENSE NUMBER A92469		13C DATE SIGNED - MM/DD/CCYY 10/11/2011
	13D TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT DENISE ISHIMARU, MD, 4201 TORRANCE BLVD., TORRANCE			14 TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT <i>Nicole Weber Supervisor</i>	
LOCAL REGISTRAR	15A DATE OF DEATH - MM/DD/CCYY	15B STATE FILE NO. STATE USE ONLY	16 LOCAL REGISTRAR - SIGNATURE JONATHAN E FIELDING, MD <i>[Signature]</i>		17 DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY 10/20/2011

This is a true certified copy of the record filed in the County of Los Angeles Department of Public Health if it bears the Registrar's signature in purple ink.



Jonathan E Fielding MD
VA
Director of Public Health and Registrar

DATE ISSUED **SEP - 4 2012**



This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE