

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF ORANGE
HEALTH CARE AGENCY
 1200 N. MAIN STREET, SUITE 100-A
 SANTA ANA, CA 92701

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
 USE BLACK INK ONLY

1201930003968

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER			
THIS CHILD	1A. NAME OF CHILD - FIRST	1B. MIDDLE	1C. LAST		
	2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH - MM/DD/CCYY	4B. HOUR - 24 HOUR CLOCK TIME
PLACE OF BIRTH	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY		5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION		
	5C. CITY		5D. COUNTY		
	6A. NAME OF PARENT - FIRST		6B. MIDDLE	6C. LAST - BIRTH NAME	6D. <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT
NAME OF PARENT	8. DATE OF BIRTH				
	9A. NAME OF PARENT - FIRST	9B. MIDDLE	9C. LAST - BIRTH NAME	9D. <input checked="" type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT	10. BIRTHPLACE - STATE/ COUNTRY
INFORMANT AND BIRTH CERTIFICATION	11. DATE OF BIRTH		12A. PARENT OR OTHER INFORMANT - SIGNATURE		12B. RELATIONSHIP TO CHILD
	12C. DATE SIGNED		13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE		13B. LICENSE NUMBER
	13C. DATE SIGNED		13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT		14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT
	13E. DATE SIGNED		15A. DATE OF DEATH - MM/DD/CCYY		15B. STATE FILE NO. - STATE USE ONLY
LOCAL REGISTRAR	16. LOCAL REGISTRAR - SIGNATURE		17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY *		

CERTIFIED COPY OF VITAL RECORDS



STATE OF CALIFORNIA }
 COUNTY OF ORANGE } SS

DATE ISSUED March 29, 2019

This is a true and exact reproduction of the document officially registered and placed on file in the office of the VITAL RECORDS SECTION, ORANGE COUNTY HEALTH CARE AGENCY.

Eric G. Handler, M.D.
 Eric G. Handler, M.D.
 HEALTH OFFICER
 ORANGE COUNTY, CALIFORNIA

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

