

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA
SAN JOSE, CALIFORNIA

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY

1201743011350

| | | | |
|-----------------------------------|---|---|---|
| STATE FILE NUMBER | | LOCAL REGISTRATION NUMBER | |
| THIS CHILD | 1A. NAME OF CHILD - FIRST KAITO | 1B. MIDDLE LUCAS | 1C. LAST WONG |
| | 2. SEX MALE | 3A. THIS BIRTH, SINGLE, TWIN, ETC. SINGLE | 3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC. - |
| PLACE OF BIRTH | 4A. DATE OF BIRTH - MM/DD/CCYY 06/13/2017 | | 4B. HOUR - 24 HOUR CLOCK TIME 0203 |
| | 5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY GOOD SAMARITAN HOSPITAL | | 5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION 2425 SAMARITAN DR. |
| | 5C. CITY SAN JOSE | | 5D. COUNTY SANTA CLARA |
| NAME OF PARENT | 6A. NAME OF PARENT - FIRST DERICK | 6B. MIDDLE DAU | 6C. LAST - BIRTH NAME WONG |
| | 7. BIRTHPLACE - STATE/COUNTRY <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT VIETNAM | 8. DATE OF BIRTH 03/28/1973 | |
| NAME OF PARENT | 9A. NAME OF PARENT - FIRST ASAMI | 9B. MIDDLE - | 9C. LAST - BIRTH NAME HANAZAWA |
| | 10. BIRTHPLACE - STATE/COUNTRY <input checked="" type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> PARENT JAPAN | 11. DATE OF BIRTH 06/03/1976 | |
| INFORMANT AND BIRTH CERTIFICATION | 12A. PARENT OR OTHER INFORMANT - SIGNATURE <i>Asami Hanazawa</i> | | 12B. RELATIONSHIP TO CHILD Mother |
| | 12C. DATE SIGNED 06/14/2017 | | 13. LICENSE NUMBER A86578 |
| | 13A. ATTENDANT CERTIFIER - SIGNATURE AND DEGREE OR TITLE <i>Monica Marin</i> | | 13C. DATE SIGNED 06/14/2017 |
| | 13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT SMRITI NALWA, MD, 455 O'CONNOR DR., #390, SAN JOSE | | 14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT M. MOLINA, BIRTH RECORDER |
| 15A. DATE OF DEATH - MM/DD/CCYY | 15B. STATE FILE NO. - STATE USE ONLY | 16. LOCAL REGISTRAR - SIGNATURE SARA CODY, M.D. | 17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY 06/19/2017 |



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CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF SANTA CLARA
This is a true and exact reproduction of the document officially registered and placed on file in the Office of the Santa Clara County Clerk-Recorder.

Regina Alcomendras
REGINA ALCOMENDRAS
COUNTY CLERK-RECORDER

AUG 25 2017

DATE ISSUED

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the County Clerk.

PRNCO 18/11/0316

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

