

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF ORANGE

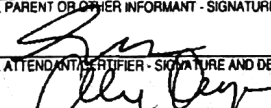
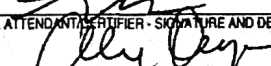
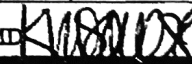
HEALTH CARE AGENCY

1200 N. MAIN STREET, SUITE 100-A

SANTA ANA, CA 92701

CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA USE BLACK INK ONLY

1201230023532

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER			
THIS CHILD	1A. NAME OF CHILD - FIRST KAZUTAKA		1B. MIDDLE JACK		1C. LAST SEGAWA
	2. SEX MALE	3A. THIS BIRTH, SINGLE, TWIN, ETC. SINGLE	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC. -	4A. DATE OF BIRTH - MM/DD/YYYY 08/03/2012	4B. HOUR - 24 HOUR CLOCK TIME 1146
PLACE OF BIRTH	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY HOAG MEMORIAL HOSPITAL		5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION ONE HOAG DRIVE		
	5C. CITY NEWPORT BEACH		5D. COUNTY ORANGE		
FATHER PARENT	6A. NAME OF FATHER/PARENT - FIRST MINORU	6B. MIDDLE -	6C. LAST SEGAWA	7. BIRTHPLACE - STATE/COUNTRY JAPAN	8. DATE OF BIRTH - MM/DD/YYYY 04/07/1976
MOTHER PARENT	9A. NAME OF MOTHER/PARENT - FIRST SHIORI	9B. MIDDLE -	9C. LAST - BIRTH NAME AMANO	10. BIRTHPLACE - STATE/COUNTRY JAPAN	11. DATE OF BIRTH - MM/DD/YYYY 07/19/1979
INFORMANT AND BIRTH CERTIFICATION	1. I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		12A. PARENT OR OTHER INFORMANT - SIGNATURE 		12B. RELATIONSHIP TO CHILD Mother
	1. I CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED.		13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE 		13B. LICENSE NUMBER G-67568
	13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT A DEYAN, MD, 360 SAN MIGUEL DR #508, NEWPORT BEACH		14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT		
LOCAL REGISTRAR	15A. DATE OF DEATH - MM/DD/YYYY	15B. STATE FILE NO. - STATE USE ONLY	16. LOCAL REGISTRAR - SIGNATURE ERIC G. HANDLER, MD 		17. DATE ACCEPTED FOR REGISTRATION - MM/DD/YYYY 08/13/2012

CERTIFIED COPY OF VITAL RECORDS



* 003144967 *

STATE OF CALIFORNIA }
COUNTY OF ORANGE } SS

DATE ISSUED

AUG 22 2012

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 H.O.
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.

PRNCO-RES10812



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE