

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

1200919046138

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

THIS CHILD	1A NAME OF CHILD - FIRST BENJAMIN		1B MIDDLE KOKI	1C LAST KINOSHITA	
	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 05/18/2009
PLACE OF BIRTH	5A PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY KAISER HOSPITAL: SOUTH BAY			5B STREET ADDRESS - STREET AND NUMBER OR LOCATION 25825 SOUTH VERMONT AVE	
	5C CITY HARBOR CITY			5D COUNTY LOS ANGELES	
FATHER PARENT	6A NAME OF FATHER PARENT - FIRST BRIAN		6B MIDDLE KIYOSHI	6C LAST KINOSHITA	7 BIRTHPLACE - STATE COUNTRY CA
	8 DATE OF BIRTH - MM DD CCYY 05/06/1970				
MOTHER PARENT	9A NAME OF MOTHER PARENT - FIRST RUMIKO		9B MIDDLE -	9C LAST - BIRTH NAME HARA	10 BIRTHPLACE - STATE COUNTRY JAPAN
	11 DATE OF BIRTH - MM DD CCYY 09/26/1973				
INFORMANT AND BIRTH CERTIFICATION	1 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 <i>Brian Kinoshita</i>		12B RELATIONSHIP TO CHILD FATHER
	1 CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED		13A ATTENDANT CERTIFIER - SIGNATURE AND DEGREE OR TITLE <i>M. Ghodsizadeh</i>		12C DATE SIGNED - MM/DD/CCYY 05/19/2009
	13D TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT N. GHODSIZADEH, MD, 25825 S. VERMONT AVE, HARBOR CITY		13B LICENSE NUMBER A76928		13C DATE SIGNED - MM/DD/CCYY 05/19/2009
LOCAL REGISTRAR	15A DATE OF DEATH - MM DD CCYY			15B STATE FILE NO. - STATE USE ONLY	16 LOCAL REGISTRAR - SIGNATURE JONATHAN E FIELDING, MD SS
					17 DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY 06/01/2009



* HD1616164 *

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
 VE

DATE ISSUED

JUN - 8 2009

Director of Public Health and Registrar

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

