

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES • REGISTRAR-RECORDER/COUNTY CLERK

**CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY**

1201419106506

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
THIS CHILD	1A. NAME OF CHILD - FIRST RENKA	1B. MIDDLE HANAI	1C. LAST WANG
	2. SEX FEMALE	3A. THIS BIRTH, SINGLE, TWIN, ETC. SINGLE	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC. -
PLACE OF BIRTH:	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY KAISER HOSPITAL; LA, SUNSET	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION 4867 SUNSET BLVD.	
	5C. CITY LOS ANGELES	5D. COUNTY LOS ANGELES	
FATHER/PARENT	6A. NAME OF FATHER/PARENT - FIRST PEI	6B. MIDDLE CHI	6C. LAST VUONG
	7. BIRTH-PLACE - STATE/COUNTRY TAIWAN	8. DATE OF BIRTH - MM/DD/CCYY 11/24/1978	
MOTHER/PARENT	9A. NAME OF MOTHER/PARENT - FIRST MARINA	9B. MIDDLE -	9C. LAST - BIRTH NAME HANAI
	10. BIRTH-PLACE - STATE/COUNTRY JAPAN	11. DATE OF BIRTH - MM/DD/CCYY 08/09/1984	
ATTENDANT AND BIRTH CERTIFICATION	12A. PARENT OR OTHER INFORMANT - SIGNATURE <i>Mother</i>		12B. RELATIONSHIP TO CHILD MOTHER
	12C. DATE SIGNED - MM/DD/CCYY 11/12/2014		13. LICENSE NUMBER RESIDENT
LOCAL REGISTRAR	13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT ROHAN HATTIANGADI, MD, 4867 SUNSET BLVD., LOS ANGELES		14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT
	15A. DATE OF DEATH - MM/DD/CCYY	15B. STATE FILE NO. - STATE USE ONLY	16. LOCAL REGISTRAR - SIGNATURE <i>Jeffrey D Gunzenhauser, MD</i>
		17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY 11/21/2014	

This is to certify that this document is a true copy of the official record filed with the Registrar-Recorder/County Clerk.

Dean C Logan
DEAN C. LOGAN
Registrar-Recorder/County Clerk

FEB 20 2015

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This copy not valid unless prepared on engraved border displaying the Seal and Signature of the Registrar-Recorder/County Clerk. REGCO 08/97 07/11

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE