

SANTA BARBARA COUNTY

SANTA BARBARA, CALIFORNIA

STATE/PLR NUMBER				CERTIFICATE OF LIVE BIRTH		1200842001026	
STATE OF CALIFORNIA				USE BLACK INK ONLY		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/YYYY
	FRANCES	QUEEN	HUNTER	FEMALE	SINGLE		02/27/2008
PLACE OF BIRTH	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION	5C. CITY	5D. STATE	5E. ZIP CODE	5F. HOUR - 24 HOUR CLOCK TIME	
	COTTAGE HOSPITAL	PUEBLO AT BATH STREET	SANTA BARBARA	SANTA BARBARA	93100	0900	
FATHER'S INFORMATION	6A. NAME OF FATHER/PARENT - FIRST	6B. MIDDLE	6C. LAST	7. BIRTHPLACE - STATE/COUNTRY	8. DATE OF BIRTH - MM/DD/YYYY	9. DATE OF DEATH - MM/DD/YYYY	
	RYNESE	JAYLA JAMES	DRUCK				
MOTHER'S INFORMATION	10. NAME OF MOTHER/PARENT - FIRST	10B. MIDDLE	10C. LAST	11. BIRTHPLACE - STATE/COUNTRY	12. DATE OF BIRTH - MM/DD/YYYY	13. DATE OF DEATH - MM/DD/YYYY	
	RYNESE	JAYLA JAMES	DRUCK				
ATTENDING PHYSICIAN	14. TYPE OF NAME, TITLE AND ADDRESS OF ATTENDANT	15. DATE RECEIVED FOR REGISTRATION - MM/DD/YYYY	16. LICENSE NUMBER	17. DATE OF BIRTH - MM/DD/YYYY	18. DATE OF DEATH - MM/DD/YYYY	19. DATE OF BIRTH - MM/DD/YYYY	
	JOHN VANDERKAM, MD, 515 W PUEBLO, SANTA BARBARA	03/02/2008	G-32295	03/02/2008	03/02/2008	03/02/2008	
18. LOCAL REGISTRAR - SIGNATURE				19. DATE RECEIVED FOR REGISTRATION - MM/DD/YYYY		20. DATE OF BIRTH - MM/DD/YYYY	
ELLIOT SCHULMAN, M.D.				03/04/2008		03/04/2008	

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA
COUNTY OF SANTA BARBARA

SS

DATE ISSUED

JUL 30 2008



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Joseph E. Holland
JOSEPH E. HOLLAND
COUNTY CLERK, RECORDER and ASSESSOR
SANTA BARBARA, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of County Clerk, Recorder and Assessor.

