

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**SANTA BARBARA COUNTY**  
 SANTA BARBARA, CALIFORNIA

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

STATE FILE NUMBER: [REDACTED] LOCAL REGISTRATION NUMBER: [REDACTED]

THIS CHILD	1A. NAME OF CHILD - FIRST LILIBET	1B. MIDDLE DIANA	1C. LAST MOUNTBATTEN-WINDSOR
	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 SANTA BARBARA COTTAGE HOSPITAL		5B. STREET ADDRESS, STREET AND NUMBER, OR LOCATION [REDACTED]
	5C. CITY SANTA BARBARA		5D. COUNTY SANTA BARBARA
NAME OF PARENT	6A. NAME OF PARENT - FIRST THE DUKE OF SUSSEX	6B. MIDDLE -	6C. LAST - BIRTH NAME HIS ROYAL HIGHNESS
	7. BIRTHPLACE - STATE/COUNTRY UNITD KINGDOM	7. DATE OF BIRTH 09/15/1984	8. DATE OF BIRTH 06/04/2021
NAME OF PARENT	9A. NAME OF PARENT - FIRST RACHEL	9B. MIDDLE MEGHAN	9C. LAST - BIRTH NAME MARKLE
	10. BIRTHPLACE - STATE/COUNTRY CA	10. DATE OF BIRTH 08/04/1981	11. DATE OF BIRTH 06/07/2021
INFORMANT AND BIRTH CERTIFICATION	12A. PARENT OR OTHER INFORMANT - SIGNATURE [REDACTED]		12B. RELATIONSHIP TO CHILD BIRTH CLERK
	13. LICENSE NUMBER [REDACTED]		13C. DATE SIGNED 06/07/2021
14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT FRANCES LAMMER, HIM SUP.			17. DATE ACCEPTED FOR REGISTRATION - MM/DD/YYYY 06/09/2021

NOT A VALID DOCUMENT TO ESTABLISH IDENTITY

CERTIFIED COPY OF VITAL RECORDS



STATE OF CALIFORNIA }  
 COUNTY OF SANTA BARBARA } SS

**JUN 23 2021**  
 DATE ISSUED

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

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE