

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

**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH**

STATE FILE NUMBER		1201119083877 LOCAL REGISTRATION NUMBER	
THIS CHILD	1A. NAME OF CHILD - FIRST <b>XANDER</b>	1B. MIDDLE <b>DANE</b>	1C. LAST <b>JONES</b>
	2. SEX <b>MALE</b>	3A. THIS BIRTH, SINGLE, TWIN, ETC. <b>SINGLE</b>	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC. <b>-</b>
PLACE OF BIRTH	4A. DATE OF BIRTH - MM/DD/CCYY <b>09/13/2011</b>		4B. HOUR - 24 HOUR CLOCK TIME <b>1811</b>
	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY <b>ST. JOHN'S HEALTH CENTER</b>		
FATHER / PARENT	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION <b>2121 SANTA MONICA BOULEVARD</b>		5C. CITY <b>SANTA MONICA</b>
	5D. COUNTY <b>LOS ANGELES</b>		5E. STATE <b>SD</b>
MOTHER / PARENT	6A. NAME OF FATHER/PARENT - FIRST <b>-</b>		6B. MIDDLE <b>-</b>
	6C. LAST <b>-</b>		6D. DATE OF BIRTH - MM/DD/CCYY <b>01/05/1978</b>
INFORMANT AND BIRTH CERTIFICATION	7A. NAME OF MOTHER/PARENT - FIRST <b>JANUARY</b>		7B. MIDDLE <b>KRISTEN</b>
	7C. LAST <b>JONES</b>		7D. DATE OF BIRTH - MM/DD/CCYY <b>09/14/2011</b>
INFORMANT AND BIRTH CERTIFICATION	8A. PARENT OR OTHER INFORMANT - SIGNATURE <i>[Signature]</i>		8B. RELATIONSHIP TO CHILD <b>MOTHER</b>
	8C. DATE SIGNED - MM/DD/CCYY <b>09/14/2011</b>		8D. LICENSE NUMBER <b>A68269</b>
INFORMANT AND BIRTH CERTIFICATION	9A. ATTENDANT CERTIFIER - SIGNATURE AND DEGREE OR TITLE <i>[Signature]</i> <b>RNC</b>		9B. DATE SIGNED - MM/DD/CCYY <b>09/14/2011</b>
	9C. TYPED NAME, TITLE AND MAKING ADDRESS OF ATTENDANT <b>N BEJANY RNC</b>		9D. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY <b>09/23/2011</b>
LOCAL REGISTRAR	10A. DATE OF DEATH - MM/DD/CCYY <b>-</b>		10B. STATE FILE NO. - DATE OF DEATH <b>-</b>
10C. LOCAL REGISTRAR - SIGNATURE <b>JONATHAN E FIELDING, MD</b>		10D. DATE <b>SEP 23 2011</b>	

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*  
VB

DATE ISSUED

SEP 23 2011



Director of Public Health and Registrar

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

