

COUNTY of FRESNO
FRESNO, CALIFORNIA

104 -

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA

1008

04535

STATE BIRTH CERTIFICATE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER			
THIS CHILD	1A. NAME OF CHILD—FIRST	1B. MIDDLE	1C. LAST		
	Roshawna	Leandra	Warren		
PLACE OF BIRTH	2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH—MONTH, DAY, YEAR	4B. HOUR—(24 HOUR CLOCK TIME)
	Female	Single		May 21, 1986	0917
FATHER OF CHILD	5A. PLACE OF BIRTH—NAME OF HOSPITAL OR FACILITY		5B. STREET ADDRESS (STREET, NUMBER, OR LOCATION)		
	Saint Agnes Medical Center		1303 E. HERNDON		
MOTHER OF CHILD	5C. CITY OR TOWN		5D. COUNTY		
	FRESNO		FRESNO		
PARENT'S CERTIFICATION	6A. NAME OF FATHER—FIRST	6B. MIDDLE	6C. LAST	7. STATE OF BIRTH	8. AGE OF FATHER
	Roger	Leon	Warren	CA	19
ATTENDANT'S CERTIFICATION	9A. NAME OF MOTHER—FIRST	9B. MIDDLE	9C. LAST (BIRTH NAME)	10. STATE OF BIRTH	11. AGE OF MOTHER
	Pamela	Michelle	Banks	CA	19
LOCAL REGISTRAR	12A. PARENT OR OTHER INFORMANT—SIGNATURE		12B. RELATIONSHIP TO CHILD	12C. DATE SIGNED	
	<i>Pamela Banks</i>		Parent	5-22-86	
	13A. PHYSICIAN OR OTHER ATTENDANT—SIGNATURE—DEGREE OR TITLE		13B. LICENSE NUMBER	13C. DATE SIGNED	
	<i>Edward Fobbs, M.D.</i>		C38922	5-22-86	
	14. 13D. TYPED NAME AND ADDRESS		17. DATE ACCEPTED FOR REGISTRATION		
	Edward Fobbs, M.D. Fresno, California 93710		MAY 28 1986		
	15. DEATH—ENTER DATE OF DEATH	16. LOCAL REGISTRAR—SIGNATURE			
		<i>David P. [Signature]</i>			

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA
COUNTY OF FRESNO

} SS

DATE ISSUED

MAR 25 2013



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Paul D. Dictos
PAUL DICTOS, C.P.A.
COUNTY RECORDER

