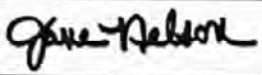




Texas birth certificate with Apostille Stamp

The State of Texas Secretary of State

This Certificate is not valid for use anywhere within the United States of America, its territories or possessions.

APOSTILLE (Convention de La Haye du 5 octobre 1961)			
1. Country: Pays / País:	United States of America		
This public document Le présent acte public / El presente documento público			
2. has been signed by a été signé par ha sido firmado por	Mary Louise Nicholson		
3. acting in the capacity of agissant en qualité de quien actúa en calidad de	County Clerk/Local Registrar		
4. bears the seal / stamp of est revêtu du sceau / timbre de y está revestido del sello / timbre de	Tarrant County, Texas		
Certified Attesté / Certificado			
5. at à / en	Austin, Texas	6. the le / el día	13th day of September 2024
7. by par / por	Secretary of State		
8. N° sous n° bajo el número			
9. Seal / stamp: Sceau / timbre: Sello / timbre:		10. Signature: Signature: Firma:	 Jane Nelson Secretary of State

This Apostille only certifies the authenticity of the signature and the capacity of the person who has signed the public document, and, where appropriate, the identity of the seal or stamp which the public document bears.

This Apostille does not certify the content of the document for which it was issued.

To verify the issuance of this Apostille, see: <https://webservices.sos.state.tx.us/certifications/index.aspx>

This certificate does not constitute an Apostille under the Hague Convention of 5 October 1961, when it is presented in a country which is not a party to the Convention. In such cases, the certificate should be presented to the consular section of the mission representing that country.

Cette Apostille atteste uniquement la véracité de la signature, la qualité en laquelle le signataire de l'acte a agi et, le cas échéant, l'identité du sceau ou timbre dont cet acte public est revêtu.

Cette Apostille ne certifie pas le contenu de l'acte pour lequel elle a été émise.

Cette Apostille peut être vérifiée à l'adresse suivante: <https://webservices.sos.state.tx.us/certifications/index.aspx>

Ce certificat ne constitue pas une Apostille en vertu de la Convention de La Haye du 5 Octobre 1961, lorsque présenté dans un pays qui n'est pas partie à cette Convention. Dans ce cas, le certificat doit être présenté à la section consulaire de la mission qui représente ce pays.

Esta Apostilla certifica únicamente la autenticidad de la firma, la calidad en que el signatario del documento haya actuado y, en su caso, la identidad del sello o timbre del que el documento público está revestido.

Esta Apostilla no certifica el contenido del documento para el cual se expidió.

Esta Apostilla se puede verificar en la dirección siguiente: <https://webservices.sos.state.tx.us/certifications/index.aspx>

Este certificado no constituye una Apostilla en virtud del Convenio de La Haya de 5 de octubre de 1961 cuando se presenta en un país que no es parte del Convenio. En estos casos, el certificado debe ser presentado a la sección consular de la misión que representa a ese país.

SecState Form TX (Rev 9/2022)



ISSUED SEP 11, 2024

WARNING: THIS DOCUMENT HAS A DARK BLUE BORDER AND A COLORED BACKGROUND

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Mary Louise Nicholson
County Clerk/Local Registrar



STATE OF TEXAS
CERTIFICATION OF VITAL RECORD

TARRANT COUNTY

STATE OF TEXAS		CERTIFICATE OF BIRTH		BIRTH NO.
CHILD	1. NAME (Type or print)	(a) First	(b) Middle	(c) Last
	2. DATE OF BIRTH			
	3. SEX	4a. PL A		
FATHER	4. Name of mother (Type or print)	5b. INSIDE CITY SE. THIS BIRTH SINGLE, TWIN, TRIPLET, ETC. (Specify)		5a. IF TWIN OR TRIPLET, WAS CHILD BORN 1st, 2nd, 3rd (Specify)
	6. Name of mother (Type or print)	(c) Last		
	7. RACE	8a. IS FATHER OF SPANISH ORIGIN?	8b. IF YES, SPECIFY MEXICAN, CUBAN, PUERTO RICAN, ETC.	
MOTHER	9. BIRTH	10. BIRTHPLACE (State or foreign)	11a. USUAL OCCUPATION	11b. KIND OF BUSINESS OR INDUSTRY
	12. MAIDEN NAME	(a) First	(b) Middle	(c) Last
	13. RACE	14a. IS MOTHER OF SPANISH ORIGIN?	14b. IF YES, SPECIFY MEXICAN, CUBAN, PUERTO RICAN, ETC.	
MOTHER	15. AGE (birth)	17b. KIND OF BUSINESS OR INDUSTRY		
	18a. RESIDENCE - STATE	18b. COUNTY	18c. CITY OR TOWN	18d. INSIDE CITY LIMITS?
	19. Children previously born to this mother (Do NOT include this birth)	a. How many other children are now living?	b. How many other children were born alive but are now dead?	c. How many children were born dead after 20 weeks pregnancy?
21. I hereby certify that this child was born alive on the date stated above		M.D., D.B., C.N.M., MIDWIFE, OTHER (Specify)		
22a. TIME 11:38A		22b. DATE SIGNED		9/5/87
23a. REGISTRAR'S FILE NO. 9527		23b. DATE REC'D BY LOCAL REGISTRAR		SEP 10 1987
		23c. SIGNATURE OF LOCAL REGISTRAR		<i>Arlene L. Harris</i>



This is a true and correct copy of the record as registered in the State of Texas. Issued under the authority of Section 191.051, Health and Safety Code.

ISSUED SEP 11, 2024

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Mary Louise Nicholson
Mary Louise Nicholson
County Clerk/Local Registrar



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE