

Washington
Office of the Secretary of State
Invalid if Removed

State of Washington 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	FRANCISCO R. VELAZQUEZ, M.D., S.M., FCAP		
3. acting in the capacity of agissant en qualité de quien actúa en calidad de	Health Officer		
4. bears seal / stamp of est revêtu du sceau / timbre de y está revistido del sello / timbre de	Spokane Regional Health District, state of Washington		
Certified Attesté / Certificado			
5. at à / en	Tumwater, Washington	6. the le / el día	July 16, 2025
7. by par / por	Steve R. Hobbs, Secretary of State, State of Washington		
8. Number sous nombre / bajo el número	[REDACTED]		
9. Seal / stamp Sceau / timbre Sello / timbre			10. Signature: Signature: Firma: 

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.

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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.

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Esta Apostille se puede verificar en la dirección siguiente: www.sos.wa.gov/corps/apostilles

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF LIVE BIRTH

STATE FILE NUMBER:

[REDACTED]

DATE ISSUED:

[REDACTED]

JULY 10, 2025

FIRST AND MIDDLE NAME(S):

[REDACTED]

LAST NAME(S):

[REDACTED]

DATE OF BIRTH:

[REDACTED]

SEX:

MALE

PLACE OF BIRTH (CITY, COUNTY, STATE):

[REDACTED]

FACILITY:

[REDACTED]

MOTHER'S NAME PRIOR TO FIRST MARRIAGE:

[REDACTED]

MOTHER'S PLACE OF BIRTH:

[REDACTED]

MOTHER'S AGE:

25 YEARS

FATHER'S NAME:

[REDACTED]

FATHER'S PLACE OF BIRTH:

[REDACTED]

FATHER'S AGE:

27 YEARS

DATE FILED:

[REDACTED]

FEE NUMBER:

[REDACTED]