Recorded District: 5151

Register Number: 0542

New York State Department of Health

CERTIFICATE OF LIVE BIRTH

State File Number: 131-2011-00018252

INFANT

1A. Name: First: Alaina | Middle: Jada | Last: Francis

2A. Date of Birth: February 28, 2011 | 2B. Hour: 2:54 PM | 3. Sex: Female | 4A. Birth Is: Triplets | 4B. If Not Single, Birth Is: Second

5. Place of Birth: Hospital | 6A. Facility Name: (Address, If Place of Birth is Other than Hospital / Birthing Center) University Hospital

6B. Locality of Birth: Town of Brookhaven | 6C. County of Birth: Suffolk

MOTHER

7A-1. Name: First: Jody-Kay | Middle: Koy | Current Last Name: Townsend

7A-2. Last Name on Birth Certificate: Townsend | 7B. Date of Birth: 07/10/1991 | 7C. City & State of Birth: (Country, if not U.S.A.) Montego Bay, Jamaica

8A. Residence, State: (Country, if not U.S.A.) New York | 8B. County: (Terr. or Prov., if not U.S.A.) Suffolk

8C. Locality: Town of Islip (Brentwood) | 8D. Inside City/Village Limit?

8E. Street and Number of Residence: 426 Freeman Ave | 8F. Zip Code: 11717

8G. Mailing Address: 426 Freeman Ave , Brentwood , NY | 8H. Zip Code: 11717

FATHER

9A-1. Name: First: Anthony | Middle: Alexander | Current Last Name: Francis

9A-2. Last Name on Birth Certificate: Francis | 9B. Date of Birth: 08/23/1966 | 9C. City & State of Birth: (Country, if not U.S.A.) May Pen, Jamaica

ATTENDANT

10A. I certify that the stated information concerning this child is true to the best of my knowledge and belief.

Signature ▶ Eva Swoboda

10B. Date Signed: Month: MAR | Day: 04 | Year: 2011

10C. Name of Certifier, If Not Attendant:

10E. Attendant's Name: FIGUEROA REINALDO | Title: MD | 10D-1. NYS License Number: (Certifier) 235565

11A. Registrar Name: PATRICIA A. EDDINGTON, TOWN CLERK AND REGISTRAR | Title: M.D. | 10F-1. NYS License Number: (Attendant) 153378

11B. Signature of the Registrar: ▶ Patricia A. Eddington

11C. Date Filed: Month: 03 | Day: 07 | Year: 2011

* 12. Information Added or Corrected:

Item No.	Date of Correction	Authorization	Original Information

DOH-1963E (09/2009)

Recorded District: 5151

Register Number: 0543

New York State Department of Health

CERTIFICATE OF LIVE BIRTH

State File Number: 131-2011-00018255

INFANT

1A. Name: First: Aliya | Middle: Jayna | Last: Francis

2A. Date of Birth: February 28, 2011 | 2B. Hour: 2:55 PM | 3. Sex: Female | 4A. Birth Is: Triplets | 4B. If Not Single, Birth Is: Third

5. Place of Birth: Hospital | 5A. Facility Name: (Address, if Place of Birth is Other than Hospital / Birthing Center): University Hospital | 5C. County of Birth: Suffolk

6B. Locality of Birth: Town of Brookhaven

MOTHER

7A-1. Name: First: Jody-Kay | Middle: Kay | Current Last Name: Townsend

7A-2. Last Name on Birth Certificate: Townsend | 7B. Date of Birth: 07/10/1991 | 7C. City & State of Birth: (Country, if not U.S.A.) Montego Bay, Jamaica

8A. Residence, State: (Country, if not U.S.A.) New York | 8B. County: (Terr. or Prov., if not U.S.A.) Suffolk

8C. Locality: Town of Islip (Brentwood) | 8D. Inside City/Village Limit?

8E. Street and Number of Residence: 426 Freeman Ave | 8F. Zip Code: 11717

8G. Mailing Address: 426 Freeman Ave , Brentwood , NY | 8H. Zip Code: 11717

FATHER

9A-1. Name: First: Anthony | Middle: Alexander | Current Last Name: Francis

9A-2. Last Name on Birth Certificate: Francis | 9B. Date of Birth: 08/23/1966 | 9C. City & State of Birth: (Country, if not U.S.A.) May Pen, Jamaica

ATTENDANT

10A. I certify that the stated information concerning this child is true to the best of my knowledge and belief. | 10B. Date Signed: Month MAR Day 04 Year 2011

Signature ▶

10C. Name of Certifier, If Not Attendant: Eva Svoboda Title: MD | 10D-1. NYS License Number: (Certifier) 235565

10E. Attendant's Name: FIGUEROA REINALDO Title: M.D. | 10F-1. NYS License Number: (Attendant) 153378

11A. Registrar Name: PATRICIA A. EDDINGTON, TOWN CLERK AND REGISTRAR

11B. Signature of the Registrar: ▶ Patricia A. Eddington | 11C. Date Filed: Month 03 Day 07 Year 2011

12. Information Added or Corrected:

Item No.	Date of Correction	Authorization	Original Information

DOH-1963E (09/2009)