STATE OF CONNECTICUT

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF PUBLIC HEALTH

CERTIFICATE OF LIVE BIRTH

SFN: 2012-07-32968

CHILD'S NAME:
ABIGAIL JANIYAH SMITH

SEX:
FEMALE

TIME OF BIRTH:
03:30 PM

DATE OF BIRTH:
NOVEMBER 13, 2012

WEIGHT:
4 LBS 14 OZS

BIRTHPLACE:
STAMFORD HOSPITAL

CITY/TOWN:
STAMFORD

COUNTY:
FAIRFIELD

MOTHER'S NAME:
TRUDY-ANN TAMEKA LAMBERT

MAIDEN SURNAME:
LAMBERT

MOTHER'S BIRTHPLACE:
JAMAICA

MOTHER'S DATE OF BIRTH:
AUGUST 19, 1982

MOTHER'S RESIDENCE:
124 LAFAYETTE STREET APT 22, STAMFORD, CONNECTICUT 06902

FATHER'S NAME:
ROYAN OTIS SMITH

FATHER'S BIRTHPLACE:
JAMAICA

FATHER'S DATE OF BIRTH:
FEBRUARY 19, 1980

CERTIFIER'S NAME:
SARA S COCA M.D.

DATE CERTIFIED:
NOVEMBER 13, 2012

ADDRESS:
161 CHERRY STREET, NEW CANAAN, CONNECTICUT 06840

REGISTERED BY:
DONNA M LOGLISCI

TITLE:
REGISTRAR

DATE REGISTERED:
NOVEMBER 30, 2012

CITY/TOWN:
STAMFORD

I HEREBY CERTIFY THAT THIS IS A TRUE CERTIFICATE OF LIVE BIRTH ISSUED FROM THE OFFICIAL RECORDS ON FILE.

DATE ISSUED:
JANUARY 07, 2013

PLACE OF ISSUANCE:
STAMFORD

SIGNATURE OF ISSUING REGISTRAR:

This copy is not a legal document unless displaying raised seal and signature of Registrar

CONNECTICUT 1788 CHARTER OAK

0707084

HE WHO TRANSPLANTED STILL SUSTAINS