

FOLIO  
AXX XXXXXX  
[BARCODE]



UNITED MEXICAN STATES  
CIVIL REGISTRY OFFICE  
BIRTH CERTIFICATE

ON BEHALF OF THE STATE OF VERACRUZ DE IGNACIO DE LA LLAVE AND AS OFFICIAL NO. 1 OF THE CIVIL REGISTRY OFFICE, I CERTIFY THAT THIS RECORD'S INFORMATION IS AN ACCURATE TRANSCRIPTION OF THE RESPECTIVE DUPLICATE REGISTER.

MUNICIPALITY: **XALAPA**

DATE OF REGISTRATION: DAY: **X** MONTH: YEAR: BOOK: RECORD:

REGISTREE'S INFORMATION

NAME:

DATE OF BIRTH:

TIME: