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To Whom It May Concern:

This letter is in reference to the birth of (*newborn name*)_____.

I was the primary midwife in attendance for our client (*mother's name*)_____,
who is the mother of the stated newborn.

The newborn was born alive at home on (*date*)_____.

Weight _____ g OR _____#_____oz.

APGARs (1)_____ (5)_____ (10)_____

The newborn had the following notable condition/situation/issue _____

All required Vital Statistics information is contained on the **Worksheet for Out-of-Hospital Births** and the **Affidavit of Information for Out-of-Hospital Births** provided by the State Registrar (last updated March 2008) and is signed by me.

Should you have any further questions, please feel free to contact me.

Sincerely,

Esther Healey
California Licensed Midwife #313