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3
4 IN THE CIRCUIT COURT OF THE STATE OF OREGON
5 FOR THE COUNTY OF MULTNOMAH
6

7 MARY LI and REBECCA KENNEDY;
8 STEPHEN KNOX, M.D., and ERIC
9 WARSHAW, M.D.; KELLY BURKE and
10 DOLORES DOYLE; DONNA POTTER and
11 PAMELA MOEN; DOMINICK VETRI and
12 DOUGLAS DEWITT; SALLY SHEKLOW
and ENID LEFTON; IRENE FARRERA and
NINA KORICAN; WALTER FRANKEL and
CURTIS KIEFER; JULIE WILLIAMS and
COLEEN BELISLE; BASIC RIGHTS
OREGON; and AMERICAN CIVIL
LIBERTIES UNION OF OREGON,

13 Plaintiffs,

14 and

15 MULTNOMAH COUNTY,

16 Intervenor-Plaintiff,

17 v.

18 STATE OF OREGON; THEODORE
19 KULONGOSKI, in his official capacity as
Governor of the State of Oregon, HARDY
20 MYERS, in his official capacity as Attorney
General of the State of Oregon; GARY
21 WEEKS, in his official capacity as Director of
the Department of Human Services of the
22 State of Oregon; and JENNIFER
WOODWARD, in her official capacity as
23 State Registrar of the State of Oregon,

24 Defendants,

25 and
26

Case No. 0403-03057

STIPULATED FACTS
(BETWEEN PLAINTIFFS AND DEFENDANTS)

1 DEFENSE OF MARRIAGE COALITION,
2 CECIL MICHAEL THOMAS, NANCY JO
3 THOMAS, DAN MATES and DICK
4 OSBORNE,

Intervenor-Defendants.

5 Plaintiffs and defendants stipulate to the truth of the facts set forth below. Plaintiffs and
6 defendants reserve the right to object to any fact on the ground of relevance:

7 1. The State Office for Services to Children and Families (SOSCF) accepts
8 applications for adoptions from same-sex couples in accordance with OAR 413-120-0200.

9 When an adoption by a same-sex couple or a same-sex partner is granted by a court, the Center
10 for Health Statistics will issue upon request consistent with the court order a birth certificate for
11 the child listing the adopting couple as parents, or the adopting partner as a second parent,
12 whichever the case may be. Attached as Exhibit 1 is an example of such a birth certificate.

13 2. The administrative rules governing placements for adoption and foster care are set
14 forth in Chapter 413 of the Oregon Administrative Rules. Those rules apply to same-sex couples
15 as well as to couples of the opposite sex. SOSCF has applied those rules in processing adoptions
16 granted to same-sex couples, and in placing foster children with same-sex couples.

17 IT IS SO STIPULATED:

18
19
20 *Lynn Nakamoto **
21 LYNN NAKAMOTO
22 Attorney for Plaintiffs

23
24 *[Signature]*
25 for STEPHEN K. BUSHONG
26 Assistant Attorney General
Attorney for Defendants

* by David Leith, pursuant to authorization

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HUMAN SERVICES HEALTH SERVICES, CENTER FOR HEALTH STATISTICS

OREGON DEPARTMENT OF HUMAN SERVICES HEALTH DIVISION

Center for Health Statistics CERTIFICATE OF LIVE BIRTH

136- 03-017956

State File Number

Type or print in
permanent black ink
See handbook for
instructions

Local File Number

CHILD	1. CHILD—NAME First: <u>Ava</u> Middle: <u>Jean</u> Last: <u>LI-KENNEDY</u>			2. SEX <u>Female</u>	3. DATE OF BIRTH <u>May 25, 2003</u>
	4. TIME OF BIRTH <u>0026</u> M		5. FACILITY—NAME (if not in hospital, or clinic, give address) <u>Emanuel Hospital</u>		6. CITY, TOWN, OR LOCATION OF BIRTH <u>Portland</u>
CERTIFIER	7. I certify that this child was born alive at the place and time and on the date stated above.			8. DATE SIGNED <u>May 30, 2003</u>	
	9. SIGNATURE → <u>Colleen Reynolds</u>			10. CERTIFIER—NAME AND TITLE <u>Colleen Reynolds, Birth Clerk</u>	
	11. NAME AND TITLE OF ATTENDANT AT BIRTH IF OTHER THAN CERTIFIER <u>Alida N Rol, MD</u>			12. ATTENDANT MAILING ADDRESS <u>10180 SE Sunnyside Rd, Clackamas, OR 97015</u>	
	13. DATE FILED BY REGISTRAR <u>June 3, 2003</u>			14. REGISTRAR—SIGNATURE <u>[Signature]</u>	
PARENT	15. NAME First: <u>Rebecca</u> Middle: <u>Jean</u> Last: <u>Kennedy</u>			16. MAIDEN SURNAME <u>Kennedy</u>	17. DATE OF BIRTH <u>Apr 3, 1961</u>
	18. RESIDENCE—STATE <u>Oregon</u>		19. COUNTY <u>Multnomah</u>	20. CITY, TOWN, OR LOCATION <u>Portland</u>	
	21. INSIDE CITY LIMITS <u>Yes</u>		22. ZIP CODE <u>97212</u>	23. STREET AND NUMBER <u>4117 N Colonial Avenue</u>	
PARENT	24. NAME First: <u>Mary</u> Middle: <u>Theresa</u> Last: <u>Li</u>			25. DATE OF BIRTH <u>Jun 26, 1963</u>	26. STATE OF BIRTH <u>Pennsylvania</u>
	27. I certify that the personal information provided on this certificate is correct to the best of my knowledge and belief. <u>Rebecca J Kennedy</u>				

504077

45-1151 (07/00)

I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE OR THE VITAL RECORD FACTS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON CENTER FOR HEALTH STATISTICS

OCT 23 2003

DATE ISSUED: _____

THIS COPY NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

[Signature]
DENNIER A. WOODWARD, PH.D.
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Li v. State Multnomah Co. 0403-03057
Stipulated Facts
Exhibit 1 Page 1 of 1

CERTIFICATE OF SERVICE

I certify that on April 5, 2004, I served the foregoing STIPULATED FACTS
(BETWEEN PLAINTIFFS AND DEFENDANTS) upon the parties hereto by the method
indicated below, and addressed to the following:

Lynn Nakamoto
Markowitz Herbold, et al.
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Of Attorneys for Plaintiffs

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