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COSMETIC & PLASTIC SURGERY

October 9, 2018

To Whom It May Concern:

In connection with forming my opinion I reviewed the following data:

1. Ten (10) photographic images of Subject A;
2. Fourteen (14) photographic images of Subject B;
3. Twelve (12) photographic images of Subject C;
4. Thirteen (13) photographic images of Subject D;
5. Two videos of Subject C¹
6. One video of Subject D²

Background

I am board certified in Plastic Surgery. I have served on the Board of Trustees of the Clark County Medical Society, as former vice chief of staff at Humana Sunrise Hospital, and Chief of Plastic surgery at both Humana Sunrise and Valley Hospitals. I have served on the Board of Trustees of the Clark County Medical Society, as former vice chief of staff at Humana Sunrise Hospital, and Chief of Plastic surgery at both Humana Sunrise and Valley Hospitals. My educational background includes a degree in art history and biology from Northwestern University. I earned a medical degree from the University of Illinois at Chicago – College of Medicine.

Opinion

As a board-certified Plastic Surgeon, I am of the opinion that Subject B and Subject C share some similarities, but I am very confident they are not the same individual. The strongest evidence for this conclusion is the discrepancy between the chins. Subject C and Subject D have

¹ (1) Agência Ecclesia. "Visita do Papa Paulo VI a Portugal, maio de 1967." *YouTube*. YouTube, 17 October 2014. <<https://www.youtube.com/watch?v=rKtONtLvwvo>>; and (2) ROME REPORTS in English. "Paul VI: the first visit of a Pope to Fatima." *YouTube*. YouTube, 12 May 2010. <<https://www.youtube.com/watch?v=2FwO0zNtiOM>>

² "Irmã Lúcia" posted by "Agência Ecclesia" on February 12, 2015, 21:22, https://www.youtube.com/watch?time_continue=1278&v=GQf2IaPF9V4

far more prominent, protrusive chins when compared to the profile view of Subject B. This difference cannot be explained by the aging process. Nor could dental work account for the observed discrepancy. In addition, Subject B's eyelids provide additional evidence that Subject B is a different individual than the individual pictured in Subject C and Subject D because (a) an eyelid crease suddenly becomes evident in the latter images and (b) the space between the brow and eyelash appears to expand over time instead of diminishing.

I am of the opinion that Subject A and Subject B is the same person. Taking into consideration normal changes during early years, I am of the opinion that Subject B is a mature Subject A. The difference in upper eyelid skin between Subject C and Subject D points to them possibly being different people or going through of periods of weight gain and loss.

Chin.

The chin of Subject B is inconsistent with the chin of Subject C and Subject D. As we age, we lose fat and bone making the appearance of the chin less prominent over time. Both Subject C and Subject D have a far more prominent chin than is evidence in Subject B. This could only be explained via a chin implant. Subject B's chin is different than both Subject C and Subject D in a manner which cannot be explained by the aging process. The chin and jaw will not be altered in the manner apparent in the images and video with usual dental work, it would take broken jaw bones or facial bones. The chin/jaw is consistent between Subject A and Subject B. The chin/jaw is consistent between Subject C and Subject D.

Eyelids and Eyebrows.

Although Subject C has a fuller upper lid compared to Subject D, as did Subject A/B, in Subject D, the aging of the upper lid is not compatible with the upper eyelids of Subjects A/B and normal aging. An upper eyelid difference exists between Subject C and D although aging alone could be a possible explanation.

However, the eyelid difference between Subject B and Subject D is significantly different in a manner likely not due to age. The same is true when comparing Subject B and Subject C, however, the appearance of Subject D's lids is stronger evidence. It would be very unusual to not be able to detect a crease in the upper lid when an individual is young and then observe such a crease when that same individual ages. In addition, the distance between the bottom of Subject B's eyebrow to her upper eyelash is shorter than the distance observable on Subject C and D. The distance should shorten, not lengthen, as a person ages because the brow is brought lower during the aging process.

The descent and less thickness of the eyebrows evident between Subject B as compared to Subject C and D can be explained by the aging process.

Mouth.

Elongation of the upper lip is common in all aging this process is evident within these images. The lips are certainly thinner when comparing Subject B and Subject C, but this is not conclusive because aging is a possible explanation.

Other Considerations.

Several items warrant additional investigation.

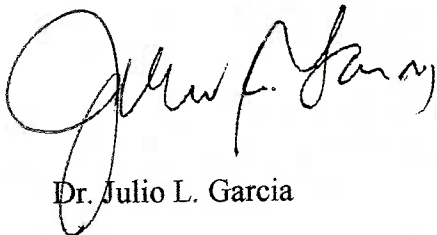
First, at least one of the images appears to have been tampered with or otherwise altered. Specifically, Subject C – Exhibit 6 presents an image of Subject C that is incompatible with the lighting present in the remainder of the image.

Second, there is also no doubt that Subject B has a narrower lower face than Subject C/Subject D. However, it's possible this difference could possibly be accounted for by the aging process.

Third, there appears to potentially be a discrepancy between the noses of Subject B and Subject C/D. The width of the nose of Subject C/D appears wide relative to the mouth when compared to the nose and mouth of Subject B. However, more analysis of this issue would be necessary.

Fourth, the amount of gingiva (gums) of the upper teeth seems larger in Subject D, and that is not a normal aging issue because this amount should decrease over time, making me believe that Subject C and Subject D possibly may not be the same person, however I would defer to the dental expert on this issue.

All of the following opinions set forth above are stated to a reasonable degree of medical probability based upon my education and training as a board-certified Plastic Surgeon.

A handwritten signature in black ink, appearing to read "Julio L. Garcia". The signature is written in a cursive style with a large initial "J".

Dr. Julio L. Garcia