

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC HEALTH

1052022036376

1202219009081

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1A. NAME OF CHILD - FIRST WOLF	1B. MIDDLE JACQUES	1C. LAST WEBSTER	
2. SEX MALE	3A. THIS BIRTH, SINGLE, TWIN, ETC. SINGLE	4A. DATE OF BIRTH - MM/DD/YYYY 02/02/2022	4B. HOUR - 24 HOUR CLOCK TIME 0535
5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY CEDARS SINAI MEDICAL CENTER		5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION [REDACTED]	
5C. CITY LOS ANGELES		5D. COUNTY LOS ANGELES	
6A. NAME OF PARENT - FIRST JACQUES	6B. MIDDLE BERMON	6C. LAST - BIRTH NAME WEBSTER II	6D. <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT TX
7A. NAME OF PARENT - FIRST KYLIE	7B. MIDDLE KRISTEN	7C. LAST - BIRTH NAME JENNER	7D. <input type="checkbox"/> MOTHER <input checked="" type="checkbox"/> FATHER <input type="checkbox"/> PARENT CA
8. I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		9. I CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED.	
12A. PARENT OR OTHER INFORMANT - SIGNATURE [REDACTED]		12B. RELATIONSHIP TO CHILD BIRTH CLERK	
13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE [REDACTED]		13B. LICENSE NUMBER [REDACTED]	
13C. WORKER, NURSE, Y.M.C.A. AND MAILING ADDRESS OF ATTENDANT [REDACTED]		14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT PERCIVAL GARCIA, H.I.T.	
15A. DATE OF DEATH - MM/DD/YYYY	15B. STATE FILE NO. - STATE USE ONLY	17. DATE ACCEPTED FOR REGISTRATION - MM/DD/YYYY 02/10/2022	

INFORMATIONAL DOCUMENT
NOT A VALID DOCUMENT
TO ESTABLISH IDENTITYCERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF LOS ANGELESThis is a true certified copy of the record filed in the County of Los Angeles
Department of Public Health if it bears the Registrar's signature in purple ink.

Health Officer and Registrar

DATE ISSUED

FEB 16 2022

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CALOSANG04