COUNTY OF LOS ANGELES

REGISTRAR-RECORDER/COUNTY CLERK

1052019599892

1201919509834

CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA

	CHIEF TO HOLLY				USE BLACK INK ONLY			LOCAL REGISTRATION NUMBER		
THIS	1A. NAME OF CHILD - FIRST			1B. MIDDLE	1B. MIDDLE		LAST			
	LEO			MINAM	MINAMI		MMOND			
	2. SEX 3A. THIS BIRTH, SINGLE, TWIN, ETC. MALE SINGLE			3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.			4A. DATE OF BIRTH - MM/DD/CCYY 05/16/2019		OUR - 24 HOUR CLOCK TIME	
PLACE OF BIRTH	5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY PROVIDENCE LCM-TORRANCE				58. STREET ADDRESS - STREET AND NUMBER, OR LOCATION 4101 TORRANCE BLVD					
	TORRANCE				5D. COUNTY LOS ANGELES					
NAME OF PARENT	6A. NAME OF PARENT - FIRST CHARLES		6B. MIDDLE RAY		6C. LAST - BIRTH NAME HAMMOND	6D. ☐ MOTHER 7. BIRTHPLAG			8. DATE OF BIRTH	
NAME OF PARENT	НІТОМІ		9B. MIDDLE -		9C. LAST - BIRTH NAME MINAMI		9D. MCTHER 10. B	RTHPLACE - STATE/ COUNTRY	11. DATE OF BIRTH 09/29/1988	
	CORRECT TO THE BEST OF MY KNOWLEDGE. HITOMI HAM				0	12B. RELATIONSHIP TO CHILD FATHER MOTHER		12C. DATE SIGNED 05/17/2019 05/17/2019		
	THE DATE, HOUR, AND PLACE STATED. SHIRLEY EF		RTIFIER-SIGNATURE AND DEGREE OR TITLE RWIN, BIRTH CLERK			13B. LICENSE NUMBER G52785		13C. DATE SIGNED 05/17/2019		
	13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT JOHN C LIM, MD 4201 TORRANCE BLVD STE 530, TORRANCE, CA				14. TYPED NAME AND TITLE OF CEI SHIRLEY ERWIN, BI					
LOCAL REGISTRAR	15A. DATE OF DEATH - MM/DD/CCYY	CCYY 15B. STATE FILE NO STATE USE ONLY		16. LOCAL REGISTRAR - SIGNATURE MUNTU DAVIS MD			17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY 05/21/2019			

This is to certify that this document is a true copy of the official record filed with the Registrar-Recorder/County Clerk.

DEAN C. LOGAN Registrar-Recorder/County Clerk

This copy is not valid unless prepared on an engraved border displaying the seal and signature of the Registrar-Recorder/County Clerk.





