BIRTH CERTIFICATE WORKSHEET

OFFICE USE ONLY

Please print clearly and answer ALL items on this form in blue or black ink. After completing, please return promptly for review.

Medical Record #: _	3 1 2		
Date/Time of Birth:		ybort 1 4	_
Sex:	If plural, #	of	

		INFORMATION		
Child Name (Legal Name to Appear on Birth Certificate	•			
First Midd	dle	Last	_ ((((((((_ ()))))))))	_ Suffix
Do you want a Social Security Number for this child?	[] Yes . [] No		projection that it is not talk	
Current Legal Name	MOTHER/PARE	NT A'S INFORMATION		
First Midd	dle	Last		_ Suffix
Maiden Name (Full Name Given at Birth or on Birth Ce				
	dle	Last	, ,	Suffix
SSN# Birth Place (State/Cou	ıntry)		Date of Birth / / _	(MM/DD/YYYY)
Mother/Parent A's Residence Address Information		1 1 100	ends of the state of	And the same property of
Street Address -	11021	Apt City/Town		Zip
State/Country —	Municipality		County	
Phone # Does Mother/Par	ent A Reside within Cit	ty Limits? [] Yes [] No Re	esiding at current residence for: Ye	ars Months
Mailing Address - Same as Residence? [] Yes []				
Street Address	e media, e en	Apt City/Town		Zip
State/Country	Municipality		County	
15 70 854 9 - 78	4	\$11.7		
Mother/Parent A's Education and Employment (Descri [] 8th grade or less [] 9th-12th grade, no diploma [] High school graduated GED completed Mother/Parent A's Business/Industry Was Mother/Parent A Employed during the past year? Employer Name Employer Street Address Employer Zip Employer Zip Employer Zip Employer Employer Zip		[] Associate degree (e.g., A [] Bachelor's degree (e.g., MA	BA, AB, BS) A, MS, MEng, MSW, MBA) D) or Professional degree (e.g., MD	
Mother/Parent A's Hispanic Origin	P. Street .	No. 1 1952111	- 10 10 10 10 10 10 10 10 10 10 10 10 10	
[] No, not Spanish/Hispanic/Latino	[] Yes, Puerto	Rican [1]	Yes, other Spanish/Hispanic/Speci	fv
[] Yes, Mexican, Mexican American, Chicano	[] Yes, Cubar		Refused	,
Mother/Parent A's Race	L 1 res, Cuba	Date of the second		
[] White	[] Chinese	[] Vietnamese	[] Samoan	
Black or African American	[] Filipino	[] Other Asian (Specify)		der (Specify)
American Indian or Alaska Native (Tribe)	_ [] Japanese	[] Native Hawaiian		and the second
[] Asian Indian	[] Korean	[] Guamanian or Chamorro	[] Refused	
What language would be best to use when giving you [] English [] Spanish [] Hindi [] Mandari What is the future source of care and immunizations [] Private Physician [] HMO/Health Plan [] HealthS	n Chinese [] Hations for your baby?	an Creole [] Portuguese [Other (Specify)	ner (Specify)

Page 1 of 2

FATHER/PARENT B'S INFORMATION

First Mid	ddle	Last			Suffix
SSN# Birth Place (State/Co					(MM/DD/YY
Father/Parent B's Residence Address Information	.,	7° , sur 1			(MAVOD)11
Is Father/Parent B's Residence same as Mother/Paren	nt A's Residence? [Yes [] No. Specify			
Street Address		Apt City/Town		7ir	
State/Country		Oly/Tollii			
Phone Number	mariopality		County		
Mailing Address - Same as Residence? [] Yes [1 No. Specify				
Street Address		Ant City/Town		7	
State/Country	Municipality	Apt Oily/Town			
P. Park			County		
Father/Parent B's Education and Employment (Descri	ibe the highest degree	e or level of school completed) [] Associate degree (e.g., AA,	AS)		
[] Some college credit but no degree		[] Bachelor's degree (e.g., BA,			
[] 9th-12th grade, no diploma		[] Master's degree (e.g., MA, M		A)	
[] High school graduated GED completed		[] Doctorate (e.g., PhD, EdD)			S,DVM,LLB,JD)
Father/Parent B's Business/Industry	Father/Parent B's Occupation				de the second
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Was Father/Parent B Employed during the past year?	11Vec [1Ne				
Employer Name	1,15 - 4 5		ne emenologia .		
Employer Name Employer Street Address	1,19 - 4 % 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ed I	Employer City	4.7	
Was Father/Parent B Employed during the past year? Employer Name Employer Street Address Employer Zip Employer Zip	1,15 - 4 5	ed I		6 55 55 65 65 65 65 65 65 65 65 65 65 65	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Employer Name Employer Street Address Employer Zip Employ Father/Parent B's Hispanic Origin [] No, not Spanish/Hispanic/Latino [] Yes, Mexican, Mexican American, Chicano Father/Parent B's Race [] White [] Black or African American	er State/Country [] Yes, Puerte [] Yes, Cuban	o Rican [] Ye	Employer County s, other Spanish/Hisp fused [] Samoa		
Employer Name Employer Street Address Employer Zip Employ Father/Parent B's Hispanic Origin [] No, not Spanish/Hispanic/Latino [] Yes, Mexican, Mexican American, Chicano Father/Parent B's Race [] White [] Black or African American [] American Indian or Alaska Native (Tribe)	er State/Country	o Rican [] Ye n [] Re [] Vietnamese [] Other Asian (Specify) [] Native Hawaiian	Employer County s, other Spanish/Hisp fused [] Samoa [] Other F	n acific Islander (Specify)	Specify)
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OBS-13 (Rev. 10/15)