

CERTIFICATION OF VITAL RECORD

TYPE/PRINT
IN
PERMANENT
BLACK INK
FOR
INSTRUCTIONS
SEE
HANDBOOK

MATCHING DC
REGISTRATION
DISTRICT NO. 6.0
REGISTERED
NUMBER 60201

STATE OF ILLINOIS

CHILD'S BIRTH NUMBER 112-1994 00A2991

CERTIFICATE OF LIVE BIRTH

1. CHILD'S NAME STEVEN EARL MARRUQUIN Jr.		2. DATE OF BIRTH (MONTH, DAY, YEAR) June 28, 1994	3. TIME OF BIRTH 07:12P
4. CHILD SEX Male	5. CHILD'S BLOOD TYPE -	6. CITY, TOWN, TWP., ROAD DIST. NO. OR LOCATION OF BIRTH SPRING VALLEY	
7. PLACE OF BIRTH Hospital		8. FACILITY NAME (IF NOT INSTITUTION, GIVE STREET AND NUMBER) ST MARGARET'S HOSPITAL	
9. CERTIFY THAT THIS CHILD WAS BORN ALIVE AT THE PLACE AND TIME AND ON THE DATE STATED. SIGNATURE <i>[Signature]</i>		10a. DATE SIGNED (MONTH, DAY, YEAR) June 29, 1994	11. ATTENDANT'S NAME AND TITLE (IF OTHER THAN CERTIFIER) (TYPE/PRINT)
10b. ILLINOIS LICENSE NUMBER 36-64117		12. ATTENDANT'S MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY, TOWN, STATE, ZIP CODE) 600 E FIRST STREET SPRING VALLEY IL 61362	
13. CERTIFIER'S NAME AND TITLE (TYPE/PRINT) BASILIO PADILLA M. D.		14. LOCAL REGISTRAR'S 14a. SIGNATURE <i>[Signature]</i>	
15. MOTHER'S MAIDEN NAME (FIRST, MIDDLE, LAST) KORENNA RENEE MONTAVON		16. DATE OF BIRTH (MONTH, DAY, YEAR) 02/10/71	17. BIRTHPLACE (STATE OR FOREIGN COUNTRY) ILLINOIS
18. RESIDENCE-STREET AND NUMBER 111 S 13TH AVENUE		19a. CITY, TOWN, TWP., OR ROAD DIST. NO. MENDOTA	19b. INSIDE CITY (YES/NO) YES
20a. COUNTY LA SALLE	20b. STATE IL	20c. MOTHER'S MAILING ADDRESS (IF SAME AS RESIDENCE, ENTER ZIP CODE ONLY) TRAILOR A17, MENDOTA, IL 61342	
21. FATHER'S NAME (FIRST, MIDDLE, LAST) STEVEN MARRUQUIN		22. DATE OF BIRTH (MONTH, DAY, YEAR) 07/17/72	23. BIRTHPLACE (STATE OR FOREIGN COUNTRY) ILLINOIS
24. I CERTIFY THAT THE PERSONAL INFORMATION PROVIDED ON THIS CERTIFICATE IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.			
25a. MOTHER'S SIGNATURE <i>[Signature]</i>		25b. FATHER'S SIGNATURE <i>[Signature]</i>	

VR 100 REV 4/89

INFORMATION FOR MEDICAL AND HEALTH USE ONLY

(Based on 1989 U.S. Standard Certificate)

BUREAU COUNTY RECORDER DOCUMENT B19940060201 PAGE 1 OF 1 SCANNED 12/29/2016

CERTIFICATE COPY OF VITAL RECORDS

STATE OF ILLINOIS
COUNTY OF BUREAU

) SS APR 23 2020
DATE ISSUED

This is a true and exact reproduction of the document officially registered and placed on file in the office of BUREAU COUNTY, ILLINOIS

Matthew S. Eggers
MATTHEW S. EGGERS
COUNTY CLERK & RECORDER

This copy not valid unless prepared on border displaying seal and signature of Registrar



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

**PROBATIONARY
DRIVER LICENSE**

WISCONSIN USA



4d **M625-7859-4228-02**
1 **MARRUQUIN**
2 **STEVEN EARL**
8 **403 115TH ST
AMERY, WI 54001**

9 CLASS **D**



JUN 94

15 SEX **M** 16 HGT **5'-07"**
17 WGT **180 lb** 18 EYES **HAZ**
19 HAIR **BRO**
3 DOB **06/28/1994** 4b EXP **06/28/2024**
5 DD **OTW3S2022031611464818**
9a END **NONE**

Donor
Bliker
Hair