

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly. Use ink or typewriter.
Place X before the appropriate answer in Items 2, 5a, 5b and 15a.)

LATE REGISTRATION

Province Davao del Norte
City/Municipality Tagum City Registry No. 300

NAME (First) (Middle) (Last)
JACEY MAY SARIGUMBA

SEX X 1 Male X 2 Female
3. DATE OF BIRTH (day) (month) (year)
26 April 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality)
House No., Street, Barangay)
Davao Regional Hospital, Tagum City

5. TYPE OF BIRTH a. IF MULTIPLE BIRTH, CHILD
X 1 Single 2 Twin 3 Triplet, etc.
1 First 2 Second 3 Other, Specify

6. BIRTH ORDER (live births and fetal deaths including this delivery)
1st (first, second, third, etc.)
d. WEIGHT AT BIRTH 2966

MAIDEN NAME (First) (Middle) (Last)
JESSELE MARIE DIANITO SARIGUMBA

7. CITIZENSHIP Filipino 8. RELIGION Roman Catholic

a. Total number of children born alive: 1
b. No. of children still living including this birth: 1
c. No. of children born, alive or are now dead: 0

9. OCCUPATION Student 11. Age at time of this birth: 17

10. RESIDENCE (House No., Street, Barangay) (City/Municipality)
Purok 4, Nabunturan, Comval Province

12. NAME (First) (Middle) (Last)
UNKNOWN

13. CITIZENSHIP n/a 15. RELIGION n/a

14. OCCUPATION n/a 17. Age at time of this birth: n/a

16. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, acknowledge)
Acknowledgment/Admission of Paternity at the back.
not applicable

18. ATTENDANT
X 1 Physician 2 Nurse
4 4. Hilot (Traditional Midwife) 5 5. Others (Specify)

19. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive
on the date stated above. 6:31 p.m.

Signature: ELVIE T. PRIETO, M.D. Address: drh, Tagum City
Position: Medical Officer III Date: April 26, 2001

Chris B