



Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)	REMARKS/ANNOTATION
Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL <b>CERTIFICATE OF LIVE BIRTH</b> (Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in items 2, 5a, 5b and 19a.)			
Province <u>Cebu</u>		Registry No. <u>2000-0419</u>	
City/Municipality <u>Carcar</u>			
1. NAME (First) (Middle) (Last) <u>CHIENLY</u> <u>PACHECO</u>		For OCRG USE ONLY: Population Reference No. <u>2411-201554-2</u>	
2. SEX <u>X</u> 1 Male <u>X</u> 2 Female		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
3. DATE OF BIRTH (day) (month) (year) <u>02 November 2000</u>		41 <u>21002419</u>	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>Valladolid Health Station, Carcar, Cebu</u>		48 <u>1</u>	
5a. TYPE OF BIRTH <u>X</u> 1 Single <u>X</u> 2 Twin <u>X</u> 3 Triplet, etc.		49 50 <u>2</u> <u>021160</u>	
b. IF MULTIPLE BIRTH, CHILD WAS <u>X</u> 1 First <u>X</u> 2 Second <u>X</u> 3 Others, Specify		56 <u>22115</u>	
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>1st</u>		61 <u>1</u>	
d. WEIGHT AT BIRTH <u>2984</u> grams		62 64 <u>01</u> <u>2994</u>	
6. MAIDEN NAME (First) (Middle) (Last) <u>Ritchel O. Pacheco</u>		68 69 <u>1</u> <u>1</u>	
7. CITIZENSHIP <u>Filipino</u>		70 72 74 <u>01</u> <u>01</u> <u>02</u>	
8. RELIGION <u>Catholic</u>		76 78 <u>220</u> <u>56</u>	
9a. Total number of children born alive: <u>4</u>		81 <u>22144</u>	
b. No. of children still living including this birth: <u>4</u>		86 87 <u>1</u> <u>1</u>	
c. No. of children born alive but are now dead: <u>0</u>		88 91 <u>846</u> <u>23</u>	
10. OCCUPATION <u>housekeeper</u>		93 <u>1</u>	
11. Age at the time of this birth: <u>20</u> years		000140	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Valladolid, Carcar, Cebu</u>			
13. NAME (First) (Middle) (Last) <u>Jimmy B. Antiempo</u>			
14. CITIZENSHIP <u>Filipino</u>			
15. RELIGION <u>Catholic</u>			
16. OCCUPATION <u>machine operator</u>			
17. Age at the time of this birth: <u>23</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>not married</u>			
19a. ATTENDANT <u>X</u> 1 Physician <u>X</u> 2 Nurse <u>X</u> 3 Midwife <u>X</u> 4 Hilot (Traditional Midwife) <u>X</u> 5 Others (Specify)			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>12:00pm</u> o'clock am/pm on the date stated above.			
Signature <u>[Signature]</u>		Address <u>Poblacion, Carcar, Cebu</u>	
Name in Print <u>NENA MARGA</u>		Date <u>2 November 2000</u>	
Title or Position <u>[Signature]</u>			
20. INFORMANT			
Signature <u>[Signature]</u>		Address <u>Valladolid, Carcar, Cebu</u>	
Name in Print <u>JIMMY ANTIEMPO</u>		Date <u>20 November 2000</u>	
Relationship to the child <u>FATHER</u>			
21. PREPARED BY Signature <u>[Signature]</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR	
Name in Print <u>Irma Liza F. Canadella</u>		Signature <u>[Signature]</u>	
Title or Position		Name in Print <u>SILVERIO V. CACAYAN, JR.</u>	
Date <u>20 November 2000</u>		Title or Position <u>Mun. Civil Registrar</u>	
		Date <u>NOVEMBER 20, 2000</u>	

05904-C0-400RPP-00219-BI003

BEST POSSIBLE IMAGE



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*Lisa Grace S. Bersales*  
 LISA GRACE S. BERSALES, Ph.D.  
 National Statistician and Civil Registrar General  
 Philippine Statistics Authority





For births before 3 August 1988/on or after 3 August 1988

**AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY**

We, Jimmy B. Antiempo and \_\_\_\_\_  
 parents/parent of the child mentioned in this Certificate of Live Birth, do hereby solemnly swear that the information contained herein are true and correct to the best of our/my knowledge and belief.

\_\_\_\_\_  
 (Signature of Father)

\_\_\_\_\_  
 (Signature of Mother)

Community Tax No. 1292687  
 Date Issued 11-20-2000  
 Place Issued Carcar, Cebu

Community Tax No. \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Place Issued \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this 20th day of November 2000  
 at Carcar, Cebu, Philippines.

\_\_\_\_\_  
 (Signature of Administering Officer)  
**SILVERIO V. CACAYAN, JR.**  
 (Name in Print)

\_\_\_\_\_  
 Mun. Civil Registrar  
 (Title/Designation)  
Carcar, Cebu  
 (Address)

Not applicable for births before 27 February 1931

**AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH**

(Either the person himself if 18 years old or over, or father/mother/guardian may accomplish this affidavit.)

I, \_\_\_\_\_, of legal age, single/married  
 and with residence and postal address at \_\_\_\_\_,  
 after having been duly sworn to in accordance with law, do hereby depose and say:

1. That I am the applicant for the delayed registration of my birth/of the birth of \_\_\_\_\_
2. That I/he/she was born on \_\_\_\_\_ at \_\_\_\_\_
3. That I/he/she was attended at birth by \_\_\_\_\_ who resides at \_\_\_\_\_
4. That I/he/she is a citizen of \_\_\_\_\_
5. That my/his/her parents were  married on \_\_\_\_\_ at \_\_\_\_\_  
 not married but was acknowledge by my/his/her father whose name is \_\_\_\_\_
6. That the reason for the delay in registering my/his/her birth was due to \_\_\_\_\_
7. That a copy of my/his/her birth certificate is needed for the purpose of \_\_\_\_\_
8.  (For the applicant only) That I am married to \_\_\_\_\_  
 (For the father/mother/guardian) That I am the \_\_\_\_\_ of the said person.

\_\_\_\_\_  
 (Signature of Affiant)

Community Tax No. \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Place Issued \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
 at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
 (Signature of Administering Officer)

\_\_\_\_\_  
 (Title/Designation)

\_\_\_\_\_  
 (Name in Print)

\_\_\_\_\_  
 (Address)

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