

(Copy for OCRG)



(To be accomplished in quadruplicate)

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 19a.)

Province <u>AGUSAN DEL NORTE</u>		Registry No. <u>99-872</u>
City/Municipality <u>BUENAVISTA</u>		
1. NAME (First) <u>KIMBERLY LOI</u> (Middle) <u>GAL</u> (Last) <u>GARCIA</u>		For OCRG USE ONLY Population Referenced No. <u>020-99VV01-4</u>
2. SEX <u>1 Male</u> <input checked="" type="checkbox"/> <u>2 Female</u>	3. DATE OF BIRTH (day) <u>29</u> (month) <u>October</u> (year) <u>1999</u>	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>Brgy. 3, Buenavista, Agusan del Norte</u> (City/Municipality) (Province)		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR 41 <u>9900872</u> 42 <u>1</u> 43 <u>2</u> <u>291099</u> 44 <u>02014</u> 45 <u>1</u> 46 <u>022723</u> 47 <u>1</u> <u>1</u> 48 <u>020200</u> 49 <u>22030</u> 50 <u>02014</u> 51 <u>1</u> <u>1</u> 52 <u>61136</u> 53 <u>1</u> 54 <u>1</u>
5a. TYPE OF BIRTH <u>1 Single</u> <u>2 Twin</u> <u>3 Triplet, etc.</u>	b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> <u>2 Second</u> <u>3 Others, Specify</u>	
c. BIRTH ORDER (five births and fetal deaths including this delivery) <u>2nd</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>2722</u> grams	
6. MAIDEN NAME (First) <u>LOIDA</u> (Middle) <u>PACADOR</u> (Last) <u>CAL</u>		
7. CITIZENSHIP <u>Filipino</u>	8. RELIGION <u>U.C.C.P.</u>	
9a. Total number of children born alive: <u>2</u>	b. No. of children still living including this birth: <u>2</u>	c. No. of children born alive but are now dead: <u>0</u>
10. OCCUPATION <u>Housekeeper</u>		11. Age at the time of this birth: <u>30</u> years
12. RESIDENCE (House No., Street, Barangay) <u>Brgy. 3, Buenavista, Agusan del Norte</u> (City/Municipality) (Province)		
13. NAME (First) <u>EDUARDO</u> (Middle) <u>DE GUZMAN</u> (Last) <u>GARCIA</u>		55 <u>02014</u> 56 <u>1</u> <u>1</u> 57 <u>022723</u> 58 <u>1</u> <u>1</u> 59 <u>020200</u> 60 <u>22030</u> 61 <u>02014</u> 62 <u>1</u> <u>1</u> 63 <u>61136</u> 64 <u>1</u> 65 <u>1</u>
14. CITIZENSHIP <u>Filipino</u>		
16. OCCUPATION <u>rice farmer</u>		17. Age at the time of this birth: <u>36</u> years
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>May 28, 1998 - U.C.C.P. Buenavista, Agusan del Norte</u>		
19a. ATTENDANT <u>4. Midwife</u> <u>5. Others (Specify)</u>		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>6:45A.M.</u> o'clock <u>am/pm</u> on the date stated above.		
Signature <u>[Signature]</u> Address <u>Brgy. 1, Buenavista, Agusan del Norte</u> Name in Print <u>LISA GRACE S. BERSALES</u> Date <u>November 5, 1999</u> Title of Position <u>Registrar General</u>		
20. INFORMANT Signature <u>[Signature]</u> Address <u>Brgy. 1, Buenavista, Agusan del Norte</u> Name in Print <u>LISA GRACE S. BERSALES</u> Date <u>November 5, 1999</u> Relationship to the child <u>None</u>		
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>SARAH T. ABURCA</u> Title of Position <u>Chief Clerk</u> Date <u>November 5, 1999</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>RANONA B. CASTILLA</u> Title of Position <u>Assistant Civil Registrar</u> Date <u>November 5, 1999</u>

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