



Statistical Form No. 102 (Revised 1982)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

Self Registration
86-1486

PROVINCE: Cebu LOCAL CIVIL REGISTRY NO. _____

CITY/MUNICIPALITY: Lapu-Lapu City

1. NAME (First) PRINCE (Middle) HERNANDEZ (Last) MACAS

2. SEX (Place 'X' on appropriate answer)
1 Male 2 Female

3. DATE OF BIRTH (Day) 2 (Month) 21 (Year) 1986

4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) ONE HOSPITAL HOUSE (City/Municipality) Lapu-Lapu City (Province) Cebu

5a. TYPE OF BIRTH (Place 'X' on appropriate answer)
 1 Single 2 Twin 3 Three or more

5b. IF MULTIPLE BIRTH, CHILD WAS
 1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) Carmelita (Middle) De (Last) MACAS

7. NATIONALITY FILE

8. RELIGION RC

9. NAME (First) RODRIGO (Middle) DE (Last) MACAS

10. NATIONALITY FILE

11. RELIGION RC

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment of the sex)
MARRIED

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at _____ o'clock a.m./p.m. on the date stated above.

Signature _____ Address _____
Name in print _____ Date _____
Title or position _____

14. INFORMANT
Signature Carmelita De Macas Address Cebu, 120
Name in print Carmelita De Macas Date 6-27-86
Relationship to child Mother

15a. PREPARED BY
Signature _____ Address _____
Name in print Concepcion F. Alcala Date _____
Title or position CLERK
Date 6-27-86

15b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature _____ Address _____
Name in print MARIE DE ROSARIO De De Date _____
Title or position C-2-0-128
Date 6-27-86

15c. INFORMATION GIVEN IN SUPPLEMENTAL REPORT _____

15d. DATE WHEN INFORMATION WAS SUPPLIED 6-27-86

(Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar)

RESERVE FOR BINDING

PROVINCE Cebu Local Civil Registry No. _____ Registration Status _____

CITY/MUNICIPALITY Lapu-Lapu City

17. Weight at Birth (in grams) _____

18. Birth Order of Child (Ex. first, second, etc.) _____

19. Total Number of Children Born Alive _____

20. Usual Occupation HOUSEWIFE

21. Age of the time of this Birth _____

22. Usual Residence (Barangay) CALULAD (City/Municipality) Lapu-Lapu City (Province) Cebu

23. Usual Occupation HOUSEWIFE (MOTHER)

24. Age of the time of this Birth _____

25. Attendant at Birth (Place 'X' on appropriate answer)
 1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others

Sex Male Female

Date of Birth _____

Place of Birth _____

Mother's Nationality _____

Father's Nationality _____

NAME OF CHILD (First, M.I., Last)

06590-7F-400BLA-01265-BI001

BEST POSSIBLE IMAGE



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[02226-A80B206-7]

Documentary

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

AFFIDAVIT OF ACKNOWLEDGMENT
(Self parents or if a member of the family may accomplish the Affidavit)

We, I, _____ and _____ parents/
parent of the child mentioned in the 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)
Residence Certificate No. _____
Date Issued _____
Place Issued _____

(Signature of Mother)
Residence Certificate No. _____
Date Issued _____
Place Issued _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 19 _____
at _____, Philippines.

(Signature of Administering Officer)

(Name in Print)

(Title/ Designation)

(Address)

AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH

(Not applicable for births prior to February 27, 1931. Either the person himself, if 21 years old or over, or father/mother/guardian may accomplish the Affidavit)

Carmelita B. Macan, of legal age, single /married and with residence and postal address of
Sanjulae, IIG, 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 PRESTIE B. MACAN
 2. That I/he/she was born on JANUARY 2, 1980
 3. That I/he/she is a citizen of Philippines
 4. That the reason for the delay in registering my/his/her birth was due to Negligence
 5. That a copy of my/his/her birth certificate is needed for the purpose of Record Purposes
 6. a. (For the applicant only) That I am married to _____
b. (For father/mother/guardian) That I am the father/mother/guardian of the said person.

Carmelita B. Macan
(Signature of Affiant)

Residence Certificate No. _____
Date Issued _____ Place Issued _____

SUBSCRIBED AND SWORN to before me this 17th day of June, 19 86
of Laguayan City, Philippines.

(Signature of Administering Officer)
WALTER B. BERNY, Jr., D.
(Name in Print)

City Health Officer
Local Civil Registrar
(Title/ Designation)
Laguayan City
(Address)

HOW TO ACCOMPLISH THIS FORM

1. Accomplish this form in triplicate copies. Upon registration submit the original and duplicate copies to the Local Civil Registrar, and keep the third copy for your personal file.
2. Type or write legibly in ink on the blank spaces provided.
3. Fill up all items in this form completely and accurately.
4. For correctness and accuracy of data, the mother or the father shall be preferred as informant over any other person.
5. The informant shall be asked to sign item 14 of this form upon completion. Before doing so he should review the answers for each item and make sure that the entries made therein are all correct and that the name of the child as well as the names of the parents are correctly spelled.
6. Registration status refers to whether or not registration is delayed. If delayed, place '2' in box 15; otherwise place '1'.

PENALTY CLAUSE OF ACT NO. 3753

Section 16 - False Statements - Any person who shall knowingly make false statements in the forms furnished and shall present the entry in the civil register, shall be punished by imprisonment for not less than one month nor more than six, or by a fine of not less than two hundred pesos nor more than five hundred or both, in the discretion of the court.

Section 17 - Failure to Report - Other Violations - Any person whose duty is to report any fact concerning the civil status of persons and who knowingly fails to perform such duty, and any person convicted of having violated any of the provisions of this Act, shall be punished by a fine of not less than ten nor more than two hundred pesos.

Section 18 - Neglect of Duty with Reference to the Provisions of this Act. Any local civil registrar who fails properly to perform his duties in accordance with the provisions of this Act and of the regulations issued hereunder, shall be punished for the first offense, by an administrative fine in a sum equal to his salary for not less than fifteen days nor more than three months, and for a second or repeated offense, by removal from the service.

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BReN
(02226-A80B206-7)

Documentary
Stamp Tax Paid

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



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86-1486

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. _____
 CITY/MUNICIPALITY Lapu-Lapu City

1. NAME (First) BERNIE (Middle) BERDINI (Last) MACAN
 2. SEX (Place 'X' on appropriate answer) 1 Male X 2 Female
 3. DATE OF BIRTH (Day) 2 (Month) JANUARY (Year) 1980
 4. PLACE OF BIRTH (Name of Hospital/Institution; if not in hospital, give street/berangoy) OPEN MATERNITY HOUSE (City/Municipality) Lapu-Lapu City (Province) Cebu
 5a. TYPE OF BIRTH (Place 'X' on appropriate answer) X 1 Single 2 Twin 3 Three or more
 b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc.
 6. MAIDEN NAME (First) Carmelita (Middle) Berdini (Last) Macan
 7. NATIONALITY Phil.
 8. RELIGION R. C.
 9. NAME (First) Rolando (Middle) Macan (Last) Macan
 10. NATIONALITY Phil.
 11. RELIGION R. C.
 12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back) MARCH 5, 1977

13. CERTIFICATE OF ATTENDANT AT BIRTH
 I hereby certify that I attended the birth of the child who was born alive at _____ o'clock _____ p.m. on the date stated above.

Signature _____ Address _____
 Name in print _____ Date _____
 Title or position _____

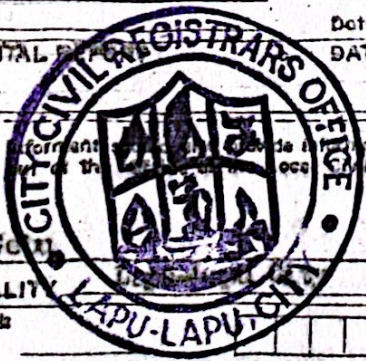
CERTIFIED MACHINE COPY
MANUEL R. PACILAN, JR.
 ASSISTANT REGISTRATION OFFICER
 LAPU-LAPU CITY

14. INFORMANT
 Signature Carmelita B. Macan Address Canjulao, LLO
 Name in print Carmelita B. Macan Date 6-17-86
 Relationship to child Mother

5a. PREPARED BY
 Signature [Signature]
 Name in print Concepcion W. Dixon
 Title or position Clerk
 Date 6-17-86

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
 Signature [Signature]
 Name in print MARINI B. BERDINI, M. D.
 Title or position C-11-0-10R
 Date 6-17-86

15c. INFORMATION GIVEN IN SUPPLEMENTAL REPORTS
 DATE WHEN INFORMATION WAS SUPPLIED 6-17-86



(Important: Informants should provide information for items 17 to 25. The code boxes are to be filled by the Registrar.)

PROVINCE Cebu Local Civil Registry No. 8 Registration Status 15
 CITY/MUNICIPALITY LAPU-LAPU CITY

17. Weight at Birth (In grams) _____
 18. Birth Order of Child Ex. first, second, etc. 2nd 02
 19a. Total Number of Children Born Alive 02 22 2
 b. How many children are now living including this birth? 02 24 2
 c. How many children were born alive but are now dead? 00 28 0
 20. Usual Occupation Housekeeper 26 Z20
 21. Age at the time of this Birth 23 31 23
 22. Usual Residence (Barangay) CANJULAO (City/Municipality) Lapu-Lapu City (Province) Cebu
 23. Usual Occupation Conductor (PIRA) 30 352
 24. Age at the time of this Birth 25 41 25
 25. Attendant of Birth (Place 'X' on appropriate answer) 1 Physician 2 Nurse X 3 Midwife 4 Heilol 5 Others 3
 48
 Sex 2 46 Date of Birth 020180 45 Place of Birth 22269 51 Mother's Nationality 1 52 Father's Nationality 1 57

RESERVE FOR BINDING