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

Municipal Form No. 102,
(Revised August 2016)

(To be accomplished in quadruplicate using black ink)

Province: **CEBU** Registry No: **2020 21758**
City/Municipality: **CEBU CITY**

CHILD

1. NAME (First) **ARIANE JANE** (Middle) **BRUNO** (Last) **NAVARRA**
2. SEX (Male / Female) **FEMALE** 3. DATE OF BIRTH (Day) **22** (Month) **FEBRUARY** (Year) **2020**
4. PLACE OF BIRTH (Name of Hospital, Clinic, etc.) (City/Municipality) (Province) (Country)
CEBU PUER. CENTER & MATERNITY HOUSE, INC., CEBU CITY, CEBU
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) **SINGLE** 5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) **NOT APPLICABLE** 5c. BIRTH ORDER (Order of Birth or First, Second, Third, etc.) **FIRST** 6. WEIGHT AT BIRTH **2,600** grams

MOTHER

7. MARDEN NAME (First) **KAY** (Middle) **LOPEZ** (Last) **BRUNO**
8. CITIZENSHIP **FILIPINO** 9. RELIGION/RELIGIOUS SECT **BAPTIST**
10a. Total number of children born alive **1** 10b. No. of children still being included in the form **1** 10c. No. of children born alive but are now dead **0** 11. OCCUPATION **NONE** 12. AGE, at the time of the birth (Completed years) **29**
13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)
56 GOTHONG RD. WIRELESS SUBANGDAKU, MANDAUE CITY, PHLS.

FATHER

14. NAME (First) **EFREN JR.** (Middle) **COLINA** (Last) **NAVARRA**
15. CITIZENSHIP **FILIPINO** 16. RELIGION/RELIGIOUS SECT **ROMAN CATHOLIC** 17. OCCUPATION **COOK** 18. AGE, at the time of the birth (Completed years) **32**
19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)
56 GOTHONG ROAD WIRELESS SUBANGDAKU, MANDAUE CITY, CEBU, PHLS.

MARRIAGE OF PARENTS (If not married, completion of field of Accomplishment/Declaration of Paternity at the back.)
20a. DATE (Month) (Day) (Year) **NOT MARRIED** 20b. PLACE (City / Municipality) (Province) (Country) **NOT MARRIED**

21a. ATTENDANT
 1. Physician 2. Nurse 3. Midwife 4. Healer (Traditional Birth Attendant) 5. Others (Specify) _____

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, etc.)
I hereby certify that I attended the birth of the child who was born alive at **12:12 PM** am/pm on the date of birth specified above

Signature _____ Address **CEBU PUER. CNTR & MATERNITY HOUSE, INC., CEBU CITY**
Name in Print **RACEL GUADAVILLE CALIS, M.D.**
Title or Position **PHYSICIAN** Date **22 FEBRUARY 2020**

22. CERTIFICATION OF INFORMANT
I hereby certify that all information supplied are true and correct to my own knowledge and belief.
Signature _____
Name in Print **KAY L. BRUNO**
Relationship to the Child **MOTHER**
Address **SUBANGDAKU, MANDAUE CITY, CEBU**
Date **22 FEBRUARY 2020**

23. PREPARED BY
Signature _____
Name in Print **STANLEY E. LIBOR**
Title or Position **CLERK**
Date **22 MARCH 2020**

24. RECEIVED BY
Signature _____
Name in Print **SUSANA ALINS**
Title or Position _____
Date **NOV 04 2020**

25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature _____
Name in Print **PHILIPP A. MEGABON**
Title or Position **REGISTRAR IN CHIEF**
Date **NOV 16 2020**

REMARKS/ANNOTATIONS (For LCR/BCRG Use Only)
DELAYED REGISTRATION

TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR
8 9 11 13 15 16 17 19

08917-F8-400RAM-01484-B1001

BEST POSSIBLE IMAGE



T002089174000148405312024001

QR200537874



CSM

CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority





Republic of the Philippines
Department of Justice
National Bureau of Investigation



40024585

This is to certify that the herein-stated name, address, signature and fingerprint pertaining hereto applied for said Clearance and the results is as follows:

NBI ID NO.
B650KKEY68-ML1694470
FAMILY NAME
BRUNO
MIDDLE NAME
LOPEZ
ADDRESS
SITIO CAMAGONG BRGY LAHUG CEBU CITY
DATE OF BIRTH
November 05, 1996
CITIZENSHIP
FILIPINO
PURPOSE
MULTI-PURPOSE CLEARANCE
REMARKS
NO RECORD ON FILE

VALID UNTIL
June 07, 2025
FIRST NAME
KAY
HUSBAND'S SURNAME

PLACE OF BIRTH
KAPATAGAN LANA O DEL NORTE
CIVIL STATUS
SINGLE



SIGNATURE
Kay Bruno

GENDER
FEMALE



B650KKEY68-ML1694470

Medardo G. de Lemos
ATTY. MEDARDO G. DE LEMOS
Director

Date Printed: Friday, June 7, 2024 12:38 PM
Agency: MLIB
CASID: 032991
O.R. No.: MP188W1EYU
O.R. Date: 06/07/2024 12:33:35 PM
DET PAID
DATE: 03/29/2024
BICD: 032991
RECID: 032991
DATE: 06/07/2024
PRINT: 03/29/2024



Republic of the Philippines
Department of Justice
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PERSONAL COPY

NATIONAL BUREAU OF INVESTIGATION



Manila Form No. 102 (Revised January 1982)

(To be accomplished in quadruplicate)

(Copy for OCR)

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

REMARKS/ANNOTATION

Province: Lanao del Norte City/Municipality: Kapatagan Registry No. 1234

late registration

Form fields for child and father: 1. NAME (KAT LOPEZ BRURO), 2. SEX (Male), 3. DATE OF BIRTH (5 November 1996), 4. PLACE OF BIRTH (Parek 12 Poblacion, Kapatagan, Lanao del Norte), 5a. TYPE OF BIRTH (Single), 6. MAIDEN NAME (Emelita Castillote Lopez), 7. CITIZENSHIP (Filipino), 8. RELIGION (Baptist), 10. OCCUPATION (Housekeeper), 12. RESIDENCE (Parek 12 Poblacion, Kapatagan, Lanao del Norte), 13. NAME (EDWIN DILAG BRURO), 14. CITIZENSHIP (Filipino), 15. RELIGION (Baptist), 16. OCCUPATION (Soldier), 17. Age at the time of this birth (25 years)

Vertical form fields for child and father: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22

18. DATE AND PLACE OF MARRIAGE OF PARENTS: March 7, 1993 Poblacion, Kapatagan, Lanao del Norte

19a. ATTENDANT: 1 Physician, 2 Nurse, 3 Midwife, 4 Nurse (Traditional Midwife), 5 Others (Specify)

19b. CERTIFICATION OF BIRTH: I hereby certify that I attended the birth of the child who was born alive at 10:00 p.m. on the date stated above.

Signature: Teresita M. Bacarezza, Address: Poblacion, Kapatagan Lanao del Norte, Date: 5 November 1996

20. INFORMANT: Signature: Edwin D. Bruro, Address: Poblacion, Kapatagan Lanao del Norte, Relationship to the child: Father, Date: January 8, 1998

21. PREPARED BY: Signature: Teresita M. Bacarezza, Name in Print: Teresita M. Bacarezza, Title or Position: Midwife, Date: January 12, 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR: Signature: Lourdes A. Fuente, Name in Print: LOURDES A. FUENTE, Title or Position: MUN. CIVIL REGISTRAR, Date: 1/20/98

Handwritten initials

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CDSM

CLAIRE DENNIS S. MAPA, Ph. D. National Statistician and Civil Registrar General Philippine Statistics Authority

