

maxim

Certificate of Accreditation

This is to certify that

a EBON, LARRY BOY A^o

DRIVER'S LICENSE NUMBER:

601-17-004570

PLATE NUMBER:

0701-473647

LOG-IN NUMBER:

967-70-630

CONTACT NUMBER:

0968-90A-1062

DATE REGISTERED (mm-dd-yy):

03-01-2022

is a duly accredited partner-driver of **Maxim Delivery Moto/Food & Shop**. Maxim Delivery Moto/Food & Shop provides food and parcel delivery service with the aim to help our fellowmen continuously receive their basic needs despite being just at home. Especially during these trying times, we have our dedicated bikers who are willing and happy to be of service by bringing essentials right at our customers doorsteps.

Furthermore, our said partner-driver is well-equipped especially with sanitary protocols in ensuring that spreading of the virus is being avoided.

The issuance of this Certification is in view of the Enhanced Community Quarantine imposed by the Government to allow passage to our partner-drivers in realizing our delivery services.

The validity of this Certification is only for the duration of the said Executive Order and only when the partner-driver presents this together with any valid identification card.

CHRISTOPHER L. POLIRAN
Branch Office Account Manager
0963-289-6655 | 0963-289-6655

CHRISTOPHER L. POLIRAN

Head Manager

Taxsee Maxim PH

Printed: January 2022



AMAZON OPERATION SERVICES PHILIPPINES, INC.

Philam Life Center Cebu, Cardinal Rosales corner Samar Loop, Cebu Business Park, Barangay Luz, Cebu City, 6000

September 2, 2020

Employment Certification Letter of Ebon, Larry Boy

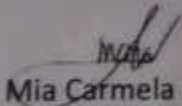
To whom it may concern;

This is to certify that Ebon, Larry Boy, a resident of Mendoza Street, Tangke 2, Naga City, is a full time permanent employee of Amazon Operation Services Philippines Inc, a PEZA duly registered BPO Company with registration number 17-137, since September 10, 2019, currently holds the position of D2TS Associate with office address located at Philam Life Center Cebu, Cardinal Rosales corner Samar Loop, Cebu Business Park, Barangay Luz, Cebu City. That the said employee may not present standard format company ID due to our corporate data privacy policy. And that in lieu of the standard ID please consider his/her blue badge along with the his/her company phone tool profile (attached) to establish his/her identity as bonafide employee of Amazon Operation Services Philippines, Inc.

The shift schedule for this employee is from 11pm - 8am.

If you have further clarification, please feel free to contact us at 032-402-8200.

Sincerely,


Mia Carmela Cuenco
Senior HR Business Partner

cc: Omela, Carol Hope Quirante

CERTIFICATE OF MARRIAGE

Province CEBU				Registry No. 2022-175							
City/Municipality CITY OF NAGA											
1. Name of Contracting Parties	HUSBAND			WIFE							
	LARRY BOY			VERONICA							
	ALFANTA EBON			PUBLICA AZUR							
2a. Date of Birth	(Day)	(Month)	(Year)	(Age)	(Day)	(Month)	(Year)	(Age)			
2b. Age	21	June	1987	34	09	July	1993	28			
3. Place of Birth	(City/Municipality)	(Province)	(Country)	(City/Municipality)	(Province)	(Country)					
	NAGA	CEBU	PHILS.	ALOGUINSAN	CEBU	PHILS.					
4a. Sex	MALE			FEMALE							
4b. Citizenship	FILIPINO			FILIPINO							
5. Residence	(House No., St., Barangay, City/Municipality, Province, Country)										
	TANGKE, CITY OF NAGA, CEBU PHILS.						TANGKE, CITY OF NAGA, CEBU PHILS.				
6. Religion/ Religious Sect	ROMAN CATHOLIC			ROMAN CATHOLIC							
7. Civil Status	SINGLE			SINGLE							
8. Name of Father	(First)	(Middle)	(Last)	(First)	(Middle)	(Last)					
	PATRICIO	NAVALES	EBON	VICENTE	PASAGUE	AZUR					
9. Citizenship	FILIPINO			FILIPINO							
10. Maiden Name of Mother	(First)	(Middle)	(Last)	(First)	(Middle)	(Last)					
	LEONIDES	ALFORNON	ALFANTA	ANASTACIA	KAQUILALA	PUBLICA					
11. Citizenship	FILIPINO			FILIPINO							
12. Name of Person Visit Who Gave Consent or Advice	(First)	(Middle)	(Last)	(First)	(Middle)	(Last)					
	N/A			N/A							
13. Relationship	N/A			N/A							
14. Residence	(House No., St., Barangay, City/Municipality, Province, Country)										
	N/A										
15. Place of Marriage	OFFICE OF THE CITY MAYOR				CITY OF NAGA, CEBU						
	(Office of the House of/Barangay of/Church of/Mosque of)				(City/Municipality) (Province)						
16. Date of Marriage	15	June	2022	17. Time of Marriage	11:00 AM			am/pm			
18. CERTIFICATION OF THE CONTRACTING PARTIES				18. CERTIFICATION OF THE CONTRACTING PARTIES							
THIS IS TO CERTIFY THAT I, LARRY BOY A. EBON				and I, VERONICA P. AZUR				both of			
legal age, of our own free will and accord, and in the presence of the person solemnizing this marriage and of the witnesses named below, take each other				as husband and wife and certifying further that we				have entered, a copy of which is hereto attached / have not entered into a marriage agreement.			
IN WITNESS WHEREOF, we have signed / marked with our fingerprint this certificate in quadruplicate this				day of				15 June 2022			
(Signature of Husband)				(Signature of Wife)							
19. CERTIFICATION OF THE SOLEMNIZING OFFICER				19. CERTIFICATION OF THE SOLEMNIZING OFFICER							
THIS IS TO CERTIFY THAT BEFORE ME, on the date and place above-written, personally appeared the above-mentioned parties, with				their mutual consent, lawfully joined together in marriage which was solemnized by me in the presence of the witnesses named below, all of legal age.							
I CERTIFY FURTHER THAT 8766077				February 21, 2022				CITY OF NAGA, CEBU			
<input checked="" type="checkbox"/> a. Marriage License No. _____ issued on _____ at _____				<input type="checkbox"/> b. no marriage license was necessary, the marriage being solemnized under Art. _____ of Executive Order No. 209.				<input type="checkbox"/> c. the marriage was solemnized in accordance with the provisions of Presidential Decree No. 1083.			
ATTY. KRISTINE VANESSA JONG				CITY MAYOR CITY OF NAGA, CEBU							
(Signature Over Printed Name of Solemnizing Officer)				(Position/Designation)				(Religion/Religious Sect, Registry No. and Expiration Date, if applicable)			
20a. WITNESSES (Print Name and Sign)				20a. WITNESSES (Print Name and Sign)							
RODOLFO PUBLICA				MARLYN PUBLICA							
21. RECEIVED BY				22. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR							
Signature _____				Signature _____							
Name in Print CLAIRE B. REPUNTE				Name in Print EVA R. LAPUT							
Title or Position REGISTRATION OFFICER I				Title or Position REGISTRATION OFFICER III							
City of Naga, Cebu				City of Naga, Cebu							
Date JUN 15 2022				Date JUN 15 2022							
REMARKS/ANNOTATIONS (For LCRO/OCR/Shar'a Circuit Registrar Use Only)											
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR											
4th	4th	5th				5th	6th	6th	7th	7th	
0	1	0	1	6	0	8	0	2	2	3	4
6	0	8	0	2	2	3	4	0	8	0	8
1								1			1

CERTIFICATE OF EXCELLENCE

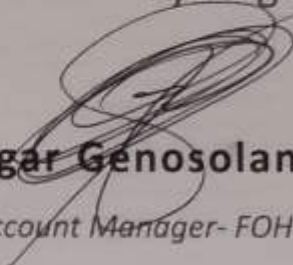
is hereby awarded to

LARRY BOY EBON


for being the **TOP 2 CHAT AGENT** of Menulog for the Month of May 2019.

Given this 27th day of June 2019 at **MENULOG Operations Floor**.

Synergis IT Building, Mabolo, CEBU CITY, Philippines.


Edgar Genosolango

Account Manager- FOH


Joanne Rivera

Operations Director

SYKES®

PAYMENT SCHEDULE

EXAM PERIOD	AMOUNT DUE (CURRENT ACCT.)	AMOUNT DUE (BACK ACCT.)	DUE DATE
PRELIM	2,976.79	1,182.65	11/29/11
PREMIDTERM	2,976.79	0.00	12/15/11
MIDTERM	2,976.79	0.00	01/25/12
PREFINAL	2,976.79	0.00	02/22/12
FINAL	2,976.79	0.00	03/15/12
TOTAL	14,883.94	1,182.65	

EXAM PERMIT

PRELIM

APPROVED

PRE-MIDTERM

APPROVED

MIDTERM

APPROVED

PRE-FINAL

APPROVED

FINAL

APPROVED



ACT

www.act.edu.ph

• STUDENT ACCOUNT PASSBOOK •

EBON, LARRY BOY A.
10-2016177 BSIT IRREG3-C

Second Semester
SY 2011-2012

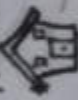
ASSESSMENT

Tuition Fees	7,708.60
Laboratory Fees	3,876.58
Matriculation Fees	3,298.76
Other Fees	00.00
TOTAL CURRENT CHARGES	14,883.94
LESS: ACT GRANT	00.00
LESS: NON-ACT GRANT	00.00
LESS: DISCOUNTS	00.00
NET CHARGES	14,883.94
ADD: OTHER ACCOUNT	00.00
ADD: BACK ACCOUNT	1,182.65
TOTAL CHARGES	16,066.59

REMINDERS

1. This form must be presented and validated upon payment and during exams. Replacement cost is P100.
2. Payments will be applied on the back account (if any) first before the current account.
3. Penalty interest of 2% per month will be charged for late payment of amount due on the current account only.

BRGY. TANGKE


MY HOUSE 

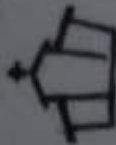



LIBBY'S WATER REFILL

MENDOZA ST.

BONIFACIO ST.

ROUTESS 

NAGA CHURCH 

TO CARCAR CITY 



JOLLIBEE



TO CEBU CITY



HONDA MOTORS

CITY OF NAGA



Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

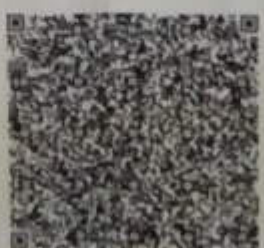
CERTIFICATE OF LIVE BIRTH

(Registered in duplicate using blank set)

Municipal Form No. 102 (Revised August 2018)		Registry No. 2018 06065		
Province CEBU				
City/Municipality CEBU CITY				
CHILD	1. NAME (First) HANS YOSSE (Middle) AZUR (Last) EBON			
	2. SEX (Male/Female) MALE	3. DATE OF BIRTH (Month) FEBRUARY (Day) 17 (Year) 2018		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Physician's Office No., St., Barangay) WELL FAMILY MIDWIFE CLINIC COGON PARDO CEBU CITY	5. TYPE OF BIRTH (Specify Date, Time, etc.) SINGLE (First, Second, Third, etc.) N/A (Multiple Birth, Child No. 1ST)		
	6. WEIGHT AT BIRTH (Pounds) 3493 (Grams)			
MOTHER	7. MOTHER'S NAME (First) VERONICA (Middle) PUBLICA (Last) AZUR			
	8. CITIZENSHIP FILIPINO	9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC		
	10a. Total number of children ever living including this birth 2	10b. No. of children born alive including this birth 0	11. OCCUPATION NONE	12. AGE at the time of the birth (Completed years) 24
	13. RESIDENCE (House No., St., Barangay) TANGKE 2 NAGA CITY CEBU (City/Municipality) CEBU (Province) PHILIPPINES (Country)			
FATHER	14. NAME (First) LARRYBOY (Middle) ALFANTA (Last) EBON			
	15. CITIZENSHIP FILIPINO	16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC	17. OCCUPATION CSR	
	18. RESIDENCE (House No., St., Barangay) TANGKE 2 NAGA CITY CEBU (City/Municipality) CEBU (Province) PHILIPPINES (Country)	19. AGE at the time of the birth (Completed years) 30		
	MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Declaration of Paternity at the back)			
20a. DATE (Month) (Day) (Year) NOT MARRIED		20b. PLACE (City/Municipality) (Province) (Country) N.A.		
21a. ATTENDANT <input type="checkbox"/> 1. Physician <input type="checkbox"/> 2. Nurse <input checked="" type="checkbox"/> 3. Midwife <input type="checkbox"/> 4. Heil (Traditional Birth Attendant) <input type="checkbox"/> 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 10:58AM and/or on the date of birth specified above.				
Signature _____ Name in Print GENEVIEVE C. SUAZO Title or Position BSM-IRM		Address WFMC-COGON PARDO CEBU CITY Date FEBRUARY 22, 2018		
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief.		23. PREPARED BY Signature _____ Name in Print PABLITA C. HEREDIA Title or Position REGISTERED MIDWIFE Date FEBRUARY 22, 2018		
24. RECEIVED BY Signature _____ Name in Print LUZ M. CUGAY Title or Position ADMINISTRATIVE AIDE II Date MAR 01 2018		25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR Signature _____ Name in Print PHILIPPA A. MEGABON Title or Position REGISTRATION OFFICER IV Date MAR 01 2018		
REMARKS/ANNOTATIONS (For LCR/OICRG Use Only)				
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR				

08596-40-400NAH-00327-B1001
 BEST POSSIBLE IMAGE

 T002086964060032710232023001



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



Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

CERTIFICATE OF LIVE BIRTH

Province	CEBU		Registry No.	2023 09576		
City/Municipality	CEBU CITY					
CHILD	1. NAME	LILLIANA BLESS	AZUR	EBON		
	2. SEX	FEMALE	3. DATE OF BIRTH	24	MAY 2023	
	4. PLACE OF BIRTH	WELL FAMILY MIDWIFE CLINIC, COGON PARDO CEBU CITY CEBU PHILIPPINES				
	5a. TYPE OF BIRTH	SINGLE	5b. IF MULTIPLE BIRTH CHILDREN	N/A	5c. BIRTH ORDER	3RD
					5d. WEIGHT AT BIRTH	2858 grams

MOTHER	7. MOTHER NAME	VERONICA	PUBLICA	AZUR		
	8. CITIZENSHIP	FILIPINO	9. RELIGION/RELIGIOUS SECT	ROMAN CATHOLIC		
	10a. Total number of children born alive	3	10b. No. of children with living including this birth	3	10c. No. of children born alive but are now dead	0
	11. OCCUPATION	HOUSEWIFE		12. AGE at the time of the birth	29	
	13. RESIDENCE	MENDOZA ST. TANGKE 2 CITY OF NAGA CEBU PHILIPPINES				

FATHER	14. NAME	LARRY BOY	ALFANTA	EBON	
	15. CITIZENSHIP	FILIPINO	16. RELIGION/RELIGIOUS SECT	ROMAN CATHOLIC	
	17. OCCUPATION	CSR		18. AGE at the time of the birth	35
	19. RESIDENCE	MENDOZA ST. TANGKE 2 CITY OF NAGA CEBU PHILIPPINES			
	MARRIAGE OF PARENTS (in case common, accepted offspring of Acknowledgment/Admission of Paternity of the birth)				

20a. DATE: JUNE 15, 2022

20b. PLACE: CITY OF NAGA, CEBU PHILIPPINES

21a. ATTENDANT

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

21b. CERTIFICATION OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 3:18 A.M. on the date of birth specified above.

Signature		Address	WFMC - COGON PARDO
Name in Print	GENEVIEVE C. SUAZO	City/Municipality	CEBU CITY
Title or Position	BSM-RM	Date	JUNE 7, 2023

22. CERTIFICATION OF INFORMANT	23. PREPARED BY
I hereby certify that all information supplied are true and correct to my own knowledge and belief.	
Signature	
Name in Print	LARRY BOY A. EBON
Relationship	FATHER
Address	MENDOZA ST. TANGKE, CITY OF NAGA, CEBU
Date	JUNE 7, 2023
Signature	
Name in Print	GENEVIEVE C. SUAZO
Title or Position	BSM-RM
Date	JUNE 7, 2023

24. RECEIVED BY	25. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature	
Name in Print	LUZ N. CUGAY
Title or Position	ADMINISTRATIVE AIDE III
Date	JUN 08 2023
Signature	
Name in Print	ATTY. EVANGELINE T. ABATAYO
Title or Position	CEBU CITY CIVIL REGISTRAR
Date	JUN 08 2023

REMARKS/ANNOTATIONS (For LCRO/OCRO Use Only)



Republic of the Philippines
 Province of Cebu
 City of Naga
BARANGAY TANGKE



barangaytangkecityofnagacebu2024@myyahoo.com
 TIN No: 004-278-805-000

NEIL A. BARTOLABAC
 Barangay Captain

Barangay Councilmen &
 Committee Chairmanship

CHRISTOPHER A. ABABA
 Committee on Infrastructure

LOURDES A. BARTOLABAC
 Committee on Appropriation &
 Health & Senior Citizen

DOMINGO L. MAÑACAP JR.
 Committee on Tourism &
 Heritage

EUGENIA P. MIEGO
 Committee on Social Works

MARLON P. CAÑETE
 Committee on Agriculture &
 Livelihood & Ways and Means

ALEX R. ENOC
 Committee on Education & Peace
 and Order

JONATHAN M. ALFORNON
 Committee on Transportation

RHYME RANIA RHINE M. PARAME
 SK Chairperson

OFFICE OF THE PUNONG BARANGAY BARANGAY CLEARANCE

TO WHOM IT MAY CONCERN:

This is to certify that **LARRY BOY EBON**, 37 years of age, married, Filipino, is a bona fide resident of Purok Apache in this Barangay, and who is personally known to me with good moral character and a law-abiding citizen of this community.

This certifies further that he/she has not committed, nor been involved in any kind of unlawful or illegal activities in this barangay.

This certification is hereby issued upon the request of **Mr. LARRY BOY EBON** to support his/her request or application for:

- | | |
|---|--|
| <input type="checkbox"/> Overseas Employment | <input type="checkbox"/> School Purposes |
| <input checked="" type="checkbox"/> Local Employment | <input type="checkbox"/> Building Permit |
| <input type="checkbox"/> Police Clearance | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Postal I.D. | <input type="checkbox"/> Fencing Permit |
| <input type="checkbox"/> Electrical Connection | <input type="checkbox"/> SSS/Philhealth/PAG-IBIG |
| <input type="checkbox"/> Business Permit | <input type="checkbox"/> Animal Bite Vaccination |
| <input type="checkbox"/> Water Connection | <input type="checkbox"/> Others: |

Issued this 28th day of June, 2024 at Barangay Tangke, City of Naga, Cebu.

Applicant's Signature



Left Thumb



Right Thumb

NEIL A. BARTOLABAC
 Barangay Captain

Not valid without seal

Res. Cert. No: _____
 Issued on : _____
 Issued at : _____

O.R. No : _____
 Date Paid : _____
 Amount : _____

FINAL PAY REMINDERS

FINAL PAY COMPONENTS

EARNINGS	DEDUCTION
Unpaid Attendance	Company and 3 rd Party Loan Balance
Unpaid Other Earnings (incentives, bonuses, Sykes Café, Leave Conversion, if any)	Loan Balances from SSS and HDMF
Pro-rated 13 th month pay (if tenure is at least 1 month)	Employee Account Receivables (unliquidated cash advance, bank loans, SSS advances, if any)
Unpaid salary adjustments	Lost Office supplies/equipment (eg badge, headset, pedestal keys)
Tax refund, if any	HMO Premium/Tax Subsidy
	Overused SIL
	Overused Sykes Café
	Other Liabilities

NOTES:

- ❖ Earnings and Deductions are subject to employee's eligibility.
- ❖ For unpaid attendance prior separation, make sure that
 - shift schedule is uploaded so that any unpaid days will be paid accordingly. Check the accuracy of punches against shift schedule;
 - OTs are approved; and
 - for any pay disputes pertaining to missing punches, late approved OTs, Credit back, please file it in Kredit Tool.
- ❖ For other pay issues such as AWOL Reversal, Health Bonus, incentives/bonuses, etc. please file it in HR Helpdesk
- ❖ All company/ client issued-items must be returned to SYKES within 30 days from separation date, otherwise, deduction will be made on separated employee's final pay.
- ❖ For Leaves:
 - For employees with more than 1 year tenure, quarterly advancement of SIL is given every 1st of each quarter (Jan 1, Apr 1, Jul 1 & Oct 1). This would mean that remaining leaves reflected in Kronos during employee's separation will have to be recomputed based on actual earning at the time of separation.
 - Earning of a leave credit is after completion of one month or the entire 30/31 days. Leave balance is computed based on the actual month/s completed.
 - Ex1: Separation Date of March 31 = Months completed is 2 months
 - Ex2: Separation Date of April 1 = Months completed is 3 months
 - Request cancellation from your manager for any advanced leave application beyond resignation date. Any over usage on actual earned leaves will be deducted on final pay.
 - For complete guideline on computation of leave conversion, pls. refer to the policy uploaded in Sharepoint.
- ❖ For Sykes Café:
 - Total Cafe points will be pro-rated based on effective date of resignation. Pro-ration is only applied to enrolled allowances and not to enrolled VL. To compute the pro-rated allowance: $(\text{Effective Date of resignation}-\text{Jan.1}) / 365 \times \text{Enrolled Allowance}$
 - o Ex: $(\text{Mar.31 Resignation Date}-\text{Jan.1})/365 \times 4200 \text{ enrolled allowance} = 1035.62$
 - Adjusted Cafe points (Enrolled leaves + pro-rated allowance) will be reconciled against total paid claims:
 - If the amount resulted to positive, these will be added to employee's final pay as part of Gross Taxable income
 - If employee utilized more than the adjusted café points, the difference will form part of employee's final pay deduction as Overused Sykes Café
 - To compute $(\text{Enrolled VL} + \text{Pro-rated allowance} - \text{Actual claims paid to the employee})$
 - Ex: $\text{Enrolled VL } 7537.70 + \text{pro-rated allowance } 1035.62 - \text{Actual claims of } 6,000.00 = 2,573.32$
- ❖ HMO coverage of the employee including their enrolled dependent/s will be cancelled, upon separation. However, employee shall remain liable to pay for the pro-rated premium for the period their enrolled dependent was covered under HMO. This amount will form part of employee's final pay deduction.



February 5, 2018

LARRY BOY EBON, 10716377

CSA
Just Eat - Menulog FOH

Dear Larry Boy,

We are very pleased to inform you that you have successfully completed your probationary period and now appointed to **REGULAR** employment status effective **February 3, 2018**. After your performance appraisal, you have been given **3.07** for your over-all performance.


Upon regularization, your salary shall remain the same, however, you will be entitled to other benefits under the **COMP3** structure as outlined in your employment contract. Together with this letter is the Insurance enrollment form. Please fill out the attached form and submit to Site HR on or before 1PM on February 8, 2018 so you may be enrolled under the company's insurance program.

For any questions regarding the Company's policies and procedures, please feel free to approach the Human Resources Department for an opportunity to discuss and clarify possible concerns you may have.

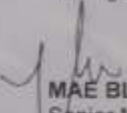
On behalf of Management, we would like to thank you for your contribution to the company. We look forward to continue working with you in the years to come.

Best personal regards

Sincerely,



EDGAR EMMANUEL GENOSOLANGO
Manager, Account-Manager



MAE BLANCO
Senior Manager, Site Human Resources

Received:

Larry Boy Ebon, 10716377

Date

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

02214-B13SF01-9
 BRen

ACKNOWLEDGED BY LARRY BOY ALFANTA EBON ON MARCH 15, 2018 UNDER REGISTRY NUMBER 2018-420.
 THE CHILD SHALL BE KNOWN AS: LYLE VANZ AZUR EBON, PURSUANT TO R.A. 9255.

Republic of the Philippines
 Office of the Civil Registrar General
 Certificate of Live Birth

1. NAME LYLE VANZ AZUR (First) (Middle) (Last)		2. SEX (Male/Female) MALE		3. DATE OF BIRTH 15 SEPTEMBER 2013 (Day) (Month) (Year)		4. PLACE OF BIRTH CARACAR CITY, CEBU (City/Municipality) (Province)	
5. TYPE OF BIRTH SINGLE		6. MULTIPLE BIRTH CHILD WAS N/A		7. MAIDEN NAME VERONICA PURTIGA		8. CITIZENSHIP FILIPINO	
9. RELIGION ROMAN CATHOLIC		10. Total number of 10b, no. of children born alive but are now dead 0		11. OCCUPATION NONE		12. AGE at the time of the birth (completed years) 28	
13. RESIDENCE (House No., St., Barangay) PUNAY, ALOGUINSAN, CEBU, PHILIPPINES (City/Municipality) (Province) (Country)		14. NAME (First) (Middle) (Last) NOT APPLICABLE		15. CITIZENSHIP NOT APPLICABLE		16. RELIGION/RELIGIOUS SECT NOT APPLICABLE	
17. OCCUPATION NOT APPLICABLE		18. AGE at the time of the birth (completed years) NOT APPLICABLE		19. RESIDENCE (House No., St., Barangay) NOT APPLICABLE (City/Municipality) (Province) (Country)		20. DATE (Month) (Day) (Year) NOT APPLICABLE	
MARRIAGE OF PARENTS (If not married, acknowledge statement of Priority of the Child.) ILLEGITIMATE							
21a. ATTENDANT 1. Physician 2. Nurse 3. Midwife 4. Heir (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 CARACAR CITY, CEBU on the date of birth specified above.							
22. CERTIFICATION OF PHYSICIAN I hereby certify that all information supplied are true and correct to my own knowledge and belief.		23. PREPARED BY ELIZABETH A. SECRETARIA CLINIC STAFF Date: 24 SEPTEMBER 2013		24. RECEIVED BY IRMA LYRA F. JIMADILLA CGRO CLERK Date: 25 SEPTEMBER 2013		25. REGISTERED BY THE CIVIL REGISTRAR CORA A. ENARGAN REGISTRATION OFFICER I Date: 25 SEPTEMBER 2013	
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)							
TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR							

DAMEL A. ADASO, SR., CESO II
 Assistant Secretary
 Deputy National Statistician
 Civil Registration and Control System Office (CRCSO)





REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
 (To be completed immediately and signed in its entirety)

PROVINCE Cebu
 CITY / MUNICIPALITY Hogya LOCAL CIVIL REGISTRY NO. _____

1. NAME (Full) Juan B. ...
 2. SEX (Place 'X' in appropriate answer) Male DATE OF BIRTH (Day) (Month) (Year) 21 Jan 87
 3. PLACE OF BIRTH (Name of hospital/institution, if not in hospital, give street/schooling) Tanque, Hogya, Cebu (City/Municipality) (Province)

4. TYPE OF BIRTH (Place 'X' in appropriate answer) 1 Single 2 Two 3 Three or more 5. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, etc.

6. MAIDEN NAME (First) (Middle) (Last) Juanita B. ... 7. NATIONALITY Phil 8. RELIGION P.C.
 9. NAME (First) (Middle) (Last) Peterson H. ... 10. NATIONALITY Phil 11. RELIGION P.C.

12. DATE AND PLACE OF MARRIAGE OF PARENTS Date Oct 17, 1988 Place Hogya, Cebu

13. CERTIFICATE OF ATTENDANT AT BIRTH (Name of attendant) Alma ... (Address) ...
 (Title or position) ... (Date) ...

14. INFORMANT (Signature) ... (Name in print) ... (Address) ...
 (Title or position) ... (Date) ...

15. PREPARED BY (Signature) ... (Name in print) ... (Address) ...
 (Title or position) ... (Date) ...

16. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRY (Signature) ... (Name in print) ... (Title or position) ... (Date) ...

17. INFORMATION GIVEN IN SUPPLEMENTAL REPORT 18. DATE UNDER INFORMATION WERE SUPPLIED

Important: Information should also provide information for items 17 to 25. The same goes on in the Office of the Local Civil Registrar.

PROVINCE Cebu Local Civil Registry No. ...
 CITY / MUNICIPALITY Hogya Registrar's Office

17. Weight at Birth (In grams) 4600 18. Birth Order of Child (1st, second, etc.) 1st
 19. Total Number of Children Born alive 011 20. How many children are now living (including still birth) 011 21. How many children with birth date and sex not stated 0
 22. Usual Occupation ... 23. Age at the time of his birth ...
 24. Usual Residence (Barangay) (City/Municipality) (Province) ...
 25. Usual Occupation ... 26. Age at the time of his birth ...

27. Attendant at Birth (Place 'X' in appropriate answer) 1 Physician 2 Nurse 3 Midwife 4 Other 5

28. Sex 1 Male 2 Female
 29. Date of Birth 21 01 87
 30. Place of Birth (City/Municipality) (Province) ...
 31. Mother's Nationality (City/Municipality) (Province) ...
 32. Father's Nationality (City/Municipality) (Province) ...

33. NAME OF CHILD (First) (Middle) (Last) JUANITA B. ...

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BEST POSSIBLE IMAGE



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BRIEN 02234-A87LM01-4

Documentary Stamp Tax Paid

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