

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 LOBU
 City/Municipality TALISAY Registry No. 2001-3229

1. NAME (First) (Middle) (Last)
ANDREA JANE DELOS

2. SEX 1 Male 2 Female
 3. DATE OF BIRTH (day) (month) (year)
4 NOVEMBER 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province)
POORACIES CITY OF TALISAY

5a. TYPE OF BIRTH 1 Single 2 Twin
3 Triplet, etc.
 b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second
3 Others, Specify _____

c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) 1st
 d. WEIGHT AT BIRTH 2.500 grams

6. MAIDEN NAME (First) (Middle) (Last)
ROSE DELOS DELOS

7. CITIZENSHIP FILIPINO 8. RELIGION ROMAN CATHOLIC

9a. Total number of children born alive: 1
 b. No. of children still living including this birth: 1
 c. No. of children born alive but are now dead: 0

10. OCCUPATION HOUSEWIFE 11. Age at the time of this birth: 23 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)

13. NAME (First) (Middle) (Last)
JOSEPH BAUER HERNANDEZ

14. CITIZENSHIP FILIPINO 15. RELIGION ROMAN CATHOLIC

16. OCCUPATION LECTURER 17. Age at the time of this birth: 23 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
NOT MARRIED

19a. ATTENDANT 3 Midwife
1 Physician 2 Nurse
4 Hilot (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 8:00 P.M. o'clock
 am/pm on the date stated above.

Signature [Signature] Address POORACIES CITY OF TALISAY
 Name in Print ESTER B. PALANO Date NOVEMBER 4, 2001
 Title or Position RHW

20. INFORMANT [Signature] Address POORACIES CITY OF TALISAY
 Signature [Signature] Date NOVEMBER 4, 2001
 Name in Print TRACEL BALDOBOL
 Relationship to the child MOTHER

21. PREPARED BY [Signature]
 Signature [Signature] FEBRITTE LOURDES G. CABAREK
 Name in Print ESTER B. PALANO Title or Position City/Municipal Civil Registrar
 Title or Position RHW Date NOV 23 2001

For OCRG USE ONLY:
 Population Reference No.

TO BE FILLED UP AT THE
 OFFICE OF THE CIVIL
 REGISTRAR

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CHILD
 MOTHER
 FATHER
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 Date

