

OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

11-7-19
REGISTRY DIVISION
2001 26370

Province CEBU
City/Municipality CEBU CITY
Registry No. 2001 26370

1. NAME (First) CIRILA MAE (Middle) LOPEZ (Last) CASTILLO
2. SEX (Male / Female) FEMALE
3. DATE OF BIRTH (Day) 10 (Month) SEPTEMBER (Year) 2001
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) 243 LUSIMBA PARDO (City/Municipality) CEBU CITY (Province) CEBU
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) SINGLE
5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.)
5c. BIRTH ORDER (First, Second, Third, etc.) FIRST
6. WEIGHT AT BIRTH 3,217 grams

7. MAIDEN NAME (First) CIRILA (Middle) CABANERO (Last) LOPEZ
8. CITIZENSHIP FILIPINO-AMERICAN
9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
10a. Total number of children born alive
10b. No. of children still living including this birth
10c. No. of children born alive but are now dead 0
11. OCCUPATION NURSE
12. AGE at the time of this birth 68
13. RESIDENCE (House No., St., Barangay) 243 LUSIMBA PARDO (City/Municipality) CEBU CITY (Province) CEBU

14. NAME (First) NARCISO (Middle) JUAN (Last) CASTILLO
15. CITIZENSHIP FILIPINO-AMERICAN
16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
17. OCCUPATION GOV'T. EMPLOYEE
18. AGE at the time of this birth 71
19. RESIDENCE (House No., St., Barangay) 243 LUSIMBA PARDO (City/Municipality) CEBU CITY (Province) CEBU

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)
20a. DATE DECEMBER 24 (Year) 1970 20b. PLACE CEBU CITY (Municipality) CEBU (Province) PHILIPPINES

21a. ATTENDANT
1 Physician 2 Nurse 3 Midwife X 4 Hilot (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 _____ am/pm on the date of birth specified above.
Signature _____ Address BULACAO PARDO
Name in Print TERESITA LANTAPE CEBU CITY
Title or Position TRADITIONAL MIDWIFE Date SEPTEMBER 20, 2001

22. CERTIFICATION OF INFORMANT
I hereby certify that all information supplied are true and correct to my own knowledge and belief.
Signature _____ Signature _____
Name in Print CIRILA L. CASTILLO TERESITA LANTAPE
Relationship to the Child MOTHER
Address 243 LUSIMBA-PARDO, CEBU CITY Title or Position SEPTEMBER 20, 2001
Date SEPTEMBER 20, 2001

24. RECEIVED BY
Signature _____ Signature _____
Name in Print LOUELLA N. DEJITO
Title or Position REGISTRATION OFFICE
Date SEPTEMBER 28, 2001

REMARKS/ANNOTATIONS (For CSRO/OCRG Use Only)
CERTIFIED TRUE COPY
JASON T. SONGZALES
REGISTRATION OFFICER II

