



Philippine Statistics Authority
 Official Form No. 102
 (Revised August 2018)

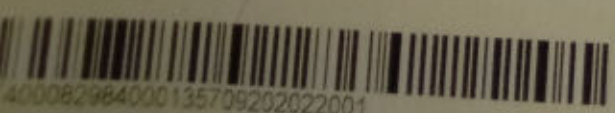
Republic of the Philippines
 OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

Registry No.
2022 06968

Province CEBU		City/Municipality CEBU CITY		Registry No. 2022 06968	
CHILD	1. NAME (First, Middle, Last) ZACHAREY ZANE ISAAC MAHINAY GECERA		2. DATE OF BIRTH (Month, Day, Year) APRIL 20 2022		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution, House No., St., Barangay) SAINT ANTHONY MOTHER & CHILD HOSPITAL, BASAK SAN NICOLAS, CEBU CITY, CEBU		6. WEIGHT AT BIRTH (Kilograms) 2850 grams		
	7. MOTHER'S NAME (First, Middle, Last) MERALYN EMPAS MAHINAY		9. RELIGION/RELIGIOUS SECT. ROMAN CATHOLIC		
	13. RESIDENCE (House No., St., Barangay, City/Municipality) NACUA COMPOUND, MAMBALING CEBU CITY CEBU PHILIPPINES		17. OCCUPATION (Country) NONE (Province) 30 (Country)		
MOTHER	10. No. of children born alive including this birth 1		11. OCCUPATION NONE (Province)		12. AGE at the time of this birth (Completed years) 30 (Country)
	14. NAME (First, Middle, Last) JEFFREY MIEGO GECERA		16. RELIGION/RELIGIOUS SECT. ROMAN CATHOLIC		
	19. RESIDENCE (House No., St., Barangay, City/Municipality) 516 C. PADILLA ST., DULJO FATIMA CEBU CITY CEBU PHILIPPINES		17. OCCUPATION (Country) E-BIKE RIDER 31 (Country)		
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back)					
20a. DATE (Month, Day, Year) NOT MARRIED		20b. PLACE (City/Municipality, Province, Country) NOT MARRIED			
21a. ATTENDANT <input checked="" type="checkbox"/> 1. Physician <input type="checkbox"/> 2. Nurse <input type="checkbox"/> 3. Midwife <input type="checkbox"/> 4. Healer (Traditional Birth Attendant) <input type="checkbox"/> 5. Others (Specify) _____					
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, Healer, etc.) I hereby certify that I attended the birth of the child who was born alive at 06:29 A.M. on the date of birth specified above.					
Signature DR. MARJA SOLEDAD T. MANOSUR			Address SAMCH - BASAK SAN NICOLAS CEBU CITY, CEBU		
Title or Position Medical Officer IV			Date APRIL 20, 2022		
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief. Signature MERALYN E MAHINAY Name in Print MOTHER Relationship to the Child Mother Address Nacua Compound, Mambaling, Cebu City, Cebu Date April 20, 2022			23. PREPARED BY Signature CLEZSA S. PILAPIL Name in Print Nurse I Title or Position April 20, 2022 Date		
24. RECEIVED BY Signature LUZ N. CUGAY Name in Print Administrative Aide III Title or Position MAY 02 2022 Date			25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR Signature PHILIPP A. MEGABON Name in Print REGISTRATION OFFICER IV Title or Position MAY 02 2022 Date		
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)					
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR					
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CLAIRE DENNIS S. MAPA, Ph. D.
 National Statistician and Civil Registrar General
 Philippine Statistics Authority