

(Copy for OCRG)



Municipal Form No. 102  
(Revised January 1993)

(To be accomplished in duplicate)

REGISTRATION/ANNOUNCEMENT

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, 3a, 4b and 19a.)

Province Surigao del Norte  
City/Municipality Pilar

Registry No. PA 103

**CHILD**

1. NAME (First) (Middle) (Last)  
LEA JANE DORIA OLIVAN

2. SEX 1 Male X Female

3. DATE OF BIRTH (day) (month) (year)  
8 November 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
Asinan, Pilar, Surigao del Norte

5a. TYPE OF BIRTH X 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 (first, second, third, etc.)

d. WEIGHT AT BIRTH 2900 grams

For OCRG USE ONLY:  
Population Reference No.

TO BE FILLED UP AT THE  
OFFICE OF THE CIVIL  
REGISTRAR

**MOTHER**

6. MAIDEN NAME (First) (Middle) (Last)  
HELODIE LOPEZAN DORIA

7. CITIZENSHIP Filipino

8. RELIGION UCCP

9a. Total number of children born alive: 01

b. No. of children still living including this birth: 01

c. No. of children born alive but are now dead: 0

10. OCCUPATION Housekeeper

11. Age at the time of this birth: 20 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
San Juan, Surigao del Norte

41

48

49  50

56

61

62  64

**FATHER**

13. NAME (First) (Middle) (Last)  
JUNJIE GALLETAS OLIVAN

14. CITIZENSHIP Filipino

15. RELIGION UCCP

16. OCCUPATION Fisherman

17. Age at the time of this birth: 25 years

68  69

70  72  74

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
22 September 2005 Gen. Luna, Surigao del Norte

76  79

19a. ATTENDANT X 1 Physician    2 Nurse    3 Midwife    4 Healer (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 1:30 o'clock am/pm on the date stated above.

81

Signature Maria Ravelo  
Name in Print MARIA RAVELO  
Title or Position Healer

Address Asinan, Pilar, Surigao del Norte  
Date 23 November 2005

86  87

20. INFORMANT  
Signature Heleodie D. Oliván  
Name in Print HELODIE D. OLIVAN  
Relationship to the child Mother

Address Gen. Luna, Surigao del Norte  
Date 23 November 2005

88  91

21. PREPARED BY  
Signature Rosa L. Ombas  
Name in Print ROSA L. OMBAS  
Title or Position Registrar  
Date 23 November 2005

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature Fernando L. Gonzales  
Name in Print FERNANDO L. GONZALES  
Title or Position Chief Civil Registrar  
Date 20 November 2005

93

94

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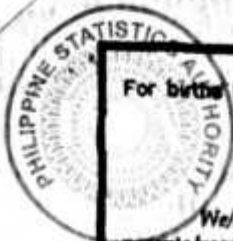
*Lisa Grace S. Bersales*  
LISA GRACE S. BERSALES, Ph.D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

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Documentary  
Stamp Tax Paid



For births before 3 August 1988/on or after 3 August 1988.

**AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY**

We/I, \_\_\_\_\_ and \_\_\_\_\_  
 parents/parent of the child mentioned in this Certificate of Live Birth, do hereby solemnly swear that the  
 information contained herein are true and correct to the best of our/my knowledge and belief.

|                                |                                |
|--------------------------------|--------------------------------|
| _____<br>(Signature of Father) | _____<br>(Signature of Mother) |
| Community Tax No. _____        | Community Tax No. _____        |
| Date Issued _____              | Date Issued _____              |
| Place Issued _____             | Place Issued _____             |

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
 at \_\_\_\_\_, Philippines.

|   |                              |
|---|------------------------------|
| _____<br>(Signature of Administering Officer) | _____<br>(Title/Designation) |
| _____<br>(Name in Print)                      | _____<br>(Address)           |

Not applicable for births before 27 February 1931

**AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH**

(Either the person himself if 18 years old or over, or father/mother/guardian may accomplish this affidavit.)

I, Melodie B. Olivan, of legal age, single/married  
 and with residence and postal address at San Luna, Surigao del Norte  
 after having been duly sworn to in accordance with law, do hereby depose and say:

- That I am the applicant for the delayed registration of my birth/of the birth of ISA JANE DONIA OLIVAN
- That I/he/she was born on 8 November 2001 at Asinan, Pilar, Surigao del Norte.
- That I/he/she was attended at birth by Mecario Raval who resides at Asinan, Pilar, Surigao del Norte.
- That I/he/she is a citizen of Philippines.
- That my/his/her parents were  married on \_\_\_\_\_ at \_\_\_\_\_  
 not married but was acknowledge by my/his/her father whose name is \_\_\_\_\_
- That the reason for the delay in registering my/his/her birth was due to naglaganap.
- That a copy of my/his/her birth certificate is needed for the purpose of registration.
- (For the applicant only) That I am married to \_\_\_\_\_  
 (For the father/mother/guardian) That I am the Mother of the said person.

Melodie B. Olivan  
 (Signature of Affiant)  
 Community Tax No. 10648417  
 Date Issued 15 November 2005  
 Place Issued San Luna - SN

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of November, 2005  
 at Pilar, Surigao del Norte, Philippines.

|   |   |
|---|---|
| _____<br>(Signature of Administering Officer)<br><b>PEPITO L. BERSALES</b><br>(Name in Print) | _____<br>Municipal Civil Registrar<br>(Title/Designation)<br><b>Pilar, Surigao del Norte</b><br>(Address) |
|---|---|

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

