



(Copy for CCRG)

Municipal Form No. 102
(Revised January 1993)
(To be accomplished in quadruplicate)
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.)

REMARKS/ANNOTATION

OCRG No. 17-1636917
D30102018 03:52:27 AM

PURSUANT TO THE DECISION RENDERED BY CCR MARIA PURA C. MASCARIÑAS DATED APRIL 24, 2017 AND AFFIRMED BY CRG UNDER OCRG NO. 17-1636917, THE CHILD'S PLACE OF BIRTH IS HEREBY CORRECTED TO "AT HOME SALVADOR LUCH EXTENSION, TIBANGA, ILIGAN CITY, LANA DEL NORTE."

Province **LANA DEL NORTE**
City/Municipality **ILIGAN CITY**
Registry No. **94-3573**

1. NAME (First) **RYLES DOMINIQUE** (Middle) **LIGUE** (Last) **MAATA**
2. SEX 1 Male 2 Female
3. DATE OF BIRTH (day) **5** (month) **MAY** (year) **1994**

For OCRG USE ONLY:
Population Reference No.
3500-1-102011-8

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
DR RIGGS SALVADOR LIGUE EXT. TEBANGA, I.C. LANA DEL NORTE

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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.) **FOURTH**
d. WEIGHT AT BIRTH **630 grams**

48
49
50

6. MAIDEN NAME (First) **PAULITA** (Middle) **SERENYO** (Last) **LIGUE**

55

7. CITIZENSHIP **FILIPINO** 8. RELIGION **ROMAN CATHOLIC**

9a. Total number of children born alive: **04** b. No. of children still living including this birth: **04** c. No. of children born alive but are now dead: **00**

61

10. OCCUPATION **TEACHER** 11. Age at the time of this birth: **47** years

62

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
SALVADOR LIGUE EXT. TEBANGA, ILIGAN CITY LANA DEL NORTE

64 **3992**
63 **04 3554**

13. NAME (First) **REGIO** (Middle) **TEBALA** (Last) **MAATA**

66 68

14. CITIZENSHIP **FILIPINO** 15. RELIGION **ROMAN CATHOLIC**

16. OCCUPATION **BUSINESSMAN** 17. Age at the time of this birth: **49** years

70 72 74

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
FEBRUARY 12, 1968 BAGUIO, LANA DEL NORTE

76 78 **129** 76 **07**

19a. ATTENDANT
 1 Physician 2 Nurse 3 Midwife
 4 Heil (Traditional Midwife) 5 Others (Specify) _____

2-18-68

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at **10:30 AM** o'clock am/pm on the date stated above.

81 **35048**
35014

Signature *[Signature]* Address **PROK 13, CANAWAY, I.C.**
Name in Print **TERESA C. JAMILQUE**
Title or Position **REGISTERED MIDWIFE** Date **MAY 22, 1994**

86 87 **6-2-94**

20. INFORMANT
Signature *[Signature]* Address **SALVADOR LIGUE EXT. TEBANGA, ILIGAN CITY**
Name in Print **PAULITA S. MAATA**
Relationship to the child **MOTHER** Date **MAY 22, 1994**

88 89 **428** 91

21. PREPARED BY
Signature *[Signature]*
Name in Print **TERESA C. JAMILQUE**
Title or Position **REGISTERED MIDWIFE**
Date **MAY 22, 1994**

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature *[Signature]*
Name in Print **CUNDELARIA M. LONG**
Title or Position **CITY CIVIL REGISTRAR**
Date **MAY 22, 1994**
CITY GOVERNMENT DEPT. HEAD D
ILIGAN CITY

93 **ILIGAN CITY**
JUN 02 1994
0350
94

MS. EDITH R. ORCILLA
Chief, Document Management Division

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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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