

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 and 19a.)

REMARKS/ANNOTATION

VATB REGISTRATION

Province NCR
City/Municipality Pasig City

Registry No. 2001 1790

1. NAME (First) Janus (Middle) Ibaoc (Last) del Valle

2. SEX 1 Male 2 Female
3. DATE OF BIRTH (Day) 3 (Month) January (Year) 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No. Street, Barangay) (City/Municipality) (Province)
Well Family Midwife Clinic 110-66T, Magsaysay St., Manggahan, Pasig City

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, second, third, etc.) 1st
d. WEIGHT AT BIRTH 2,800 grams

6. MAIDEN NAME (First) Severa (Middle) Anora (Last) Ibaoc

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: 29 years

12. RESIDENCE (House No. Street, Barangay) (City/Municipality) (Province)
245 B- Concepcion St. Santolan Pasig City

13. NAME (First) Joselito (Middle) Navarro (Last) del Valle

14. CITIZENSHIP Filipino 15. RELIGION Roman Catholic

16. OCCUPATION Maintenance 17. Age at the time of this birth: 26 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
December 08, 2000/Pasig City Hall

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

19b. CERTIFICATION OF BIRTH 7:45 AM
I hereby certify that I attended the birth of the child who was born alive at 7:45 AM o'clock am/pm on the date stated above.

Signature Lenielyn G. Forto 110-66T Magsaysay St. Manggahan, Pasig City
Name in Print Registered Midwife Date January 03, 2001
Title or Position

20. INFORMANT
Signature Severa I. del Valle 245 B-Concepcion St. Santolan Pasig City
Name in Print Mother Date January 03, 2001
Relationship to the child

21. PREPARED BY
Signature Lenielyn G. Forto
Name in Print Registered Midwife
Title or Position December 12, 2004
Date

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature
Name in Print
Title or Position
Date

For OCRG USE ONLY:
Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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