

(Copy for OCRG)

OCRG No. 18-1806460
12/27/2018 04:31:08 PM

PURSUANT TO THE DECISION RENDERED BY CCR EVANGELINE T. ABATAYO DATED JUNE 19, 2018 AND AFFIRMED BY CRG UNDER OCRG NO. 18-1806460, THE FATHER'S MIDDLE NAME "LAPING" IS HEREBY DELETED.

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
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.)					
Province <u>CEBU</u>			Registry No. <u>94-4775</u>		
City/Municipality <u>CEBU CITY</u>					
CHILD	1. NAME (First) (Middle) (Last) <u>MARTA ANGELICA MELENCION VELOSO</u>		For OCRG USE ONLY: Population Reference No.		
	2. SEX ___ 1 Male ___ <input checked="" type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>22 FEBRUARY 1997</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>CEBU PUER. CENTER & MAT. HOUSE, INC. CEBU CITY CEBU</u>		41 <u>9704775</u>		
	5a. TYPE OF BIRTH ___ 1 Single ___ 2 Twin ___ 3 Triplet, etc.		5b. IF MULTIPLE BIRTH, CHILD WAS ___ 1. First ___ 2. Second ___ 3. Others, Specify		48 <u>1</u>
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>FIRST</u>		d. WEIGHT AT BIRTH <u>3,100</u> grams		49 <u>2</u>
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>LYNN CELESTARIA MELENCION</u>		50 <u>2</u>		
	7. CITIZENSHIP <u>FIL.</u>		8. RELIGION <u>ROMAN CATHOLIC</u>		56 <u>27172</u>
	9a. Total number of children born alive: <u>1</u>	b. No. of children still living including this birth: <u>1</u>	c. No. of children born alive but are now dead: <u>0</u>		59 <u>1</u>
	10. OCCUPATION <u>FACTORY WORKER</u>		11. Age at the time of this birth: <u>26</u> years		61 <u>1</u>
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>A.C. CORTES LOOC, MANDAUE CITY CEBU</u>		62 <u>013100</u>		
FATHER	13. NAME (First) (Middle) (Last) <u>ALAN LAPING VELOSO</u>		68 <u>1</u>		
	14. CITIZENSHIP <u>FIL.</u>		15. RELIGION <u>ROMAN CATHOLIC</u>		69 <u>1</u>
	16. OCCUPATION <u>FACTORY WORKER</u>		17. Age at the time of this birth: <u>27</u> years		70 <u>010100</u>
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>JULY 27, 1996 BUEAVISTA BOHOL</u>					
19a. ATTENDANT ___ 1 Physician ___ 2 Nurse ___ 3 Midwife ___ 4 Hilot (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 <u>4:19 P.M.</u> o'clock am/pm on the date stated above.					
Signature <u>[Signature]</u> Address <u>CEBU PUER. CENTER & MAT. HOUSE, INC., CEBU CITY</u>			Name in Print <u>ALBA ROSARIO M. SUICO, M.D.</u> Date <u>FEB. 22, 1997</u>		
Title or Position <u>PHYSICIAN</u>			76 <u>747</u>		
20. INFORMANT Signature <u>[Signature]</u> Address <u>A.C. CORTES T. LOOC, MANDAUE CITY, CEBU</u>			Name in Print <u>LYNN VELOSO</u> Date <u>FEB. 22, 1997</u>		
Relationship to the child <u>MOTHER</u>			77 <u>277</u>		
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>JOCELYN B. ITONG</u> Title or Position <u>CLERK</u> Date <u>FEBRUARY 22, 1997</u>			22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>EVELYN A. ABAQUILLA</u> Title or Position <u>CLERK</u> Date <u>MAR 03 1997</u>		
			78 <u>07/27/97</u> 79 <u>12096</u> 80 <u>03/03/97</u>		

DANIEL A. ARIASO, SR., CESO II
 Deputy National Statistician
 Civil Registration and Central Support Office (CRCSO)

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