

REPUBLIC OF THE PHILIPPINES  
 CERTIFICATE OF LIVE BIRTH  
 (To be completed, according and under the provisions of the Act)

Form No. 10 (Revised 1960)

LOCAL CIVIL REGISTRAR P-TU

**1. NAME** Deva City **2. SEX** Female

**3. DATE OF BIRTH** 10 September 1971

**4. PLACE OF BIRTH** General Hospital, Cebu Legation, Cebu City

**5. NAME OF PHYSICIAN** Dr. [Signature]

**6. NAME OF WITNESSES** [Signature] [Signature]

**7. NAME OF FATHER** AMERICAN [Signature] **8. NATIONALITY** Philippine

**9. NAME OF MOTHER** [Signature] **10. NATIONALITY** Philippine

**11. DATE AND PLACE OF MARRIAGE** 10 May 1970 - Imbabura, Iquitos

**12. SIGNATURE OF REGISTRAR** [Signature] **13. DATE** 10 Sep 71

**14. SIGNATURE OF FATHER** [Signature] **15. DATE** 10 Sep 71

**16. SIGNATURE OF MOTHER** [Signature] **17. DATE** 10 Sep 71

**18. SIGNATURE OF PHYSICIAN** [Signature] **19. DATE** 10 Sep 71

**20. SIGNATURE OF WITNESSES** [Signature] [Signature] **21. DATE** 10 Sep 71

Important information should also provide information for items 17 to 21. This information should be in the form of a separate report to the Local Civil Registrar.

**22. REGISTERED** 6/20/71 **23. REGISTERED** [Signature]

**24. NAME OF CHILD** MARIA COLYAGREY

**25. SEX** Female

**26. DATE OF BIRTH** 10/09/71

**27. PLACE OF BIRTH** PHILIPPINES

**28. NAME OF FATHER** [Signature]

**29. NATIONALITY OF FATHER** Philippine

**30. NAME OF MOTHER** [Signature]

**31. NATIONALITY OF MOTHER** Philippine

**32. DATE AND PLACE OF MARRIAGE** 10 May 1970 - Imbabura, Iquitos

**33. NAME OF PHYSICIAN** [Signature]

**34. NAME OF WITNESSES** [Signature] [Signature]

**35. SIGNATURE OF REGISTRAR** [Signature] **36. DATE** 10 Sep 71

**37. SIGNATURE OF FATHER** [Signature] **38. DATE** 10 Sep 71

**39. SIGNATURE OF MOTHER** [Signature] **40. DATE** 10 Sep 71

**41. SIGNATURE OF PHYSICIAN** [Signature] **42. DATE** 10 Sep 71

**43. SIGNATURE OF WITNESSES** [Signature] [Signature] **44. DATE** 10 Sep 71

*[Handwritten initials]*