

ACKNOWLEDGED BY ROLANDO B. GODINEZ ON MARCH 05, 2014. THE SURNAME OF THE CHILD IS HEREBY CHANGED FROM LIBRE TO GODINEZ ON MARCH 05, 2014. THE CHILD SHALL BE KNOWN AS: MARY DIVINE ROSE LIBRE GODINEZ, PURSUANT TO R.A. 9255.

(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, 10 and 14b.)

(Key for OCR)

Province C E B U		Registry No. 2001-6700	REMARKS/ANNOTATION
City/Municipality LAPU-LAPU CITY			
C H I L D	1. NAME (First, Middle, Last) MARY DIVINE ROSE FUENTES LIBRE		For OCR (Use only) Population Reference No.
	2. SEX <input type="checkbox"/> 1 Male <input checked="" type="checkbox"/> 2 Female	3. DATE OF BIRTH (day, month, year) 27 October 2001	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) Open Maternity Europe, Lapu-Lapu City Cebu		TO BE FILLED BY THE OFFICE OF THE CIVIL REGISTRAR
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.	b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Other, Specify	41 0 0 1 0 6 7 0
c. BIRTH ORDER (Five births and fetal deaths including this delivery) (First, second, third, etc.) 1st		d. WEIGHT AT BIRTH 3084 grams	42 1
6. MAIDEN NAME (First, Middle, Last) MARITES FUENTES LIBRE		TO BE FILLED BY THE OFFICE OF THE CIVIL REGISTRAR	
7. CITIZENSHIP Filipino		8. RELIGION R. 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 aircraft cleaner		11. Age at the time of this birth: 24 years	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) Purok, Sasaño, Lapu-Lapu City Cebu			43 0 1 3 0 5 9
13. NAME (First, Middle, Last) N/A		14. CITIZENSHIP N/A	
15. RELIGION		16. OCCUPATION	
17. Age at the time of this birth:		18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back)	
19a. ATTENDANT <input type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input checked="" type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Heil (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)		19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at 6:46 a.m. o'clock am/pm on the date stated above.	
Signature: <i>[Signature]</i> Name in Print: Ysabel M. Lopez Title or Position: Midwife-CHI		Address: O/O CHI, Lapu-Lapu City Date: Oct. 29, 2001	
Signature: <i>[Signature]</i> Name in Print: Marites F. Libre Relationship to the child: Mother		Address: Purok, Sasaño, LLC Date: Oct. 27, 2001	
Signature: <i>[Signature]</i> Name in Print: Florencio A. Castillo Title or Position: Clerk Date: Oct. 29, 2001		Signature: <i>[Signature]</i> Name in Print: ESTRELLA P. TOGMO Title or Position: City Civil Registrar Date: Oct. 28, 2001	

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 145-ED/PA/RG-08/001A
 Child Development Management Division

08010-C5-400SBB-00767-B1008

BReN
02226-B01VT04-7

CSM
CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority



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