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Municipal Form No. 102 (Revised January 2007)

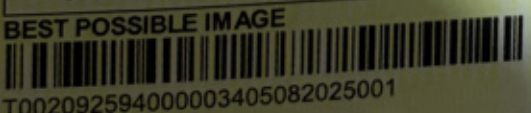
(Completed in quadruplicate using black ink)

Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL CERTIFICATE OF LIVE BIRTH

Province Metro Manila		Registry No. 2015 - 8342		
City/Municipality Teguiq City				
CHILD	1. NAME (First) Rye (Middle) Jepiten (Last) Gutierrez			
	2. SEX (Male / Female) Male	3. DATE OF BIRTH (Day) 25 (Month) August (Year) 2012		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) 10 Dimeselang St. Hagonoy (City/Municipality) Teguiq City (Province) M.M.			
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) Single	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) N/A	5c. BIRTH ORDER (Order of birth to previous live births including fetal death) (First, Second, Third, etc.) 1st	6. WEIGHT AT BIRTH 2268 grams
MOTHER	7. MAIDEN NAME (First) Anie Marie (Middle) Daculan (Last) Jepiten			
	8. CITIZENSHIP Filipino	9. RELIGION/RELIGIOUS SECT Roman Catholic		
	10a. Total number of children born alive 1	10b. No. of children still living including this birth 1	10c. No. of children born alive but are now dead 0	11. OCCUPATION Overseas Philippine Worker
	13. RESIDENCE (House No., St., Barangay) 10 Dimeselang St. Hagonoy (City/Municipality) Teguiq City (Province) M.M. (Country) Phils.			
FATHER	14. NAME (First) Ryan (Middle) Mauro (Last) Gutierrez			
	15. CITIZENSHIP Filipino	16. RELIGION/RELIGIOUS SECT Roman Catholic	17. OCCUPATION Overseas Philippine Worker	
	19. RESIDENCE (House No., St., Barangay) 10 Dimeselang St. Hagonoy (City/Municipality) Teguiq City (Province) M.M. (Country) Phils.			
	MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)			
20a. DATE (Month) Not Married (Day) Not Married (Year) Not Married		20b. PLACE (City / Municipality) Not Married (Province) Not Married (Country) Not Married		
21a. ATTENDANT				
1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" type="checkbox"/> 4 Hilot (Traditional Birth Attendant) <input type="checkbox"/> 5 Others (Specify) <input type="checkbox"/>				
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.) I hereby certify that I attended the birth of the child who was born alive at 7:05 am on the date of birth specified above.				
Signature <i>[Signature]</i> Name in Print Jocelyn R. Flores Title or Position RM		Address 14 Begong Sibong St. Hagonoy Teguiq City M.M. Date 7/27/15		
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief.		23. PREPARED BY		
Signature <i>[Signature]</i> Name in Print Anie Marie D. Jepiten Relationship to the Child Mother Address 10 Dimeselang St. Hagonoy, Teguiq City, M.M. Date 7/27/15		Signature <i>[Signature]</i> Name in Print Jocelyn R. Flores Title or Position RM Date 7/27/15		
24. RECEIVED BY Signature <i>[Signature]</i> Name in Print MELANIE A. ISAAC Title or Position CLERK-III Date JULY 27, 2015		25. REGISTERED BY THE CIVIL REGISTRAR Signature <i>[Signature]</i> Name in Print CYNTHIA T. IGNACIO Title or Position CITY CIVIL REGISTRAR CITY OF TAGUIQ Date AUG 07, 2015		
REMARKS/ANNOTATIONS (For LCRO/ICRG Use Only)		DELAYED REGISTRATION		
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR				
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[Signature]
CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority