



(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(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, 5b and 19a.)

Province LEYTE Registry No. 98-213
City/Municipality HATAION

REMARKS/ANNOTATION
1
"DELAYED REGISTRATION"

FOR OCRG USE ONLY:
Population Reference No.
[]

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41
9 8 0 0 2 1 3

48
2

49
2 1 5 4 2 0 7

56
3 7 3 4 +

61
1

62 64
0 1 3 0 6 2

68 69
1 1

70 72 74
0 1 0 1 0 0

76 78
2 2 0 2 4

81
3 7 3 4 +

86 87
9 9 1 6 2 0

88 89
0 0 0 9 9

93
2

94
4

03-13-98

1. NAME (First) (Middle) (Last)
JESSEL IGOT

2. SEX 1 Male X 2 Female

3. DATE OF BIRTH (day) (month) (year)
15 DECEMBER 1997

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
CARIDAD SUR HATAION LEYTE

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 (first, second, third, etc.)

d. WEIGHT AT BIRTH 3062 grams

6. MAIDEN NAME (First) (Middle) (Last)
LIZA BERNARDO IGOT

7. CITIZENSHIP FILIPINO B. RELIGION R.C.

8a. Total number of children born alive: 01 b. No. of children still living including this birth: 01 c. No. of children born alive but are now dead: 00

10. OCCUPATION HOUSEKEEPER 11. Age at the time of this birth: 4 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
CARIDAD SUR HATAION LEYTE

13. NAME (First) (Middle) (Last)
UNKNOWN

14. CITIZENSHIP N/A 15. RELIGION N/A

16. OCCUPATION N/A 17. Age at the time of this birth: N/A years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
"NOT APPLICABLE"

19a. ATTENDANT X 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 2:00 o'clock am/pm on the date stated above.

Signature [Signature] Address POBLACION
Name in Print ENCONDA OLO HATAION, LEYTE
Title or Position MIDWIFE Date 15 DECEMBER 1997

20. INFORMANT
Signature [Signature] Address CARIDAD SUR
Name in Print LIZA IGOT HATAION, LEYTE
Relationship to the child MOTHER Date 02 MARCH 1998

21. PREPARED BY
Signature [Signature]
Name in Print EV. GISTA P. BALANUIT
Title or Position CIVIL REGISTRY CLERK III
Date 02 MARCH 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print BEN AMADOR B. BORDA
Title or Position MR. CIVIL REGISTRAR
Date MAR 13 1998

08622-9C-400ELC-00860-BI001

BEST POSSIBLE IMAGE



T002086224000086008102023001



CDsm

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





For births before 3 August 1988/on or after 3 August 1988

AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We/I, _____ and _____
parents/parent of the child mentioned in this Certificate of Live Birth, do hereby solemnly swear that the
information contained herein are true and correct to the best of our/my knowledge and belief.

_____ (Signature of Father)	_____ (Signature of Mother)
Community Tax No. _____	Community Tax No. _____
Date Issued _____	Date Issued _____
Place Issued _____	Place Issued _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, Philippines.

_____ (Signature of Administering Officer)	_____ (Title/Designation)
_____ (Name in Print)	_____ (Address)

Not applicable for births before 27 February 1931

AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH

(Either the person himself if 18 years old or over, or father/mother/guardian may accomplish this affidavit.)

I, LEA AGOT, of legal age, single/married
and with residence and postal address at CADIZ ST., MARICOR, CEBU,
after having been duly sworn to in accordance with law, do hereby depose and say:

1. That I am the applicant for the delayed registration of my birth/of the birth of _____
2. That I/he/she was born on JANUARY 1997 at CADIZ SUR, MARICOR, CEBU
3. That I/he/she was attended at birth by _____ who resides at _____
4. That I/he/she is a citizen of _____
5. That my/his/her parents were married on _____ at _____
 not married but was acknowledge by my/his/her father whose name is _____
6. That the reason for the delay in registering my/his/her birth was due to _____
7. That a copy of my/his/her birth certificate is needed for the purpose of _____
8. (For the applicant only) That I am married to _____
 (For the father/mother/guardian) That I am the MOTHER of the said person.

Lea Agot
(Signature of Affiant)

Community Tax No. 15953741
Date Issued 03-2-98
Place Issued MARICOR, CEBU

SUBSCRIBED AND SWORN to before me this 2nd day of MARCH, 1998
at MARICOR, CEBU, Philippines.

_____ (Signature of Administering Officer)	_____ (Title/Designation)
_____ (Name in Print)	_____ (Address)

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BEST POSSIBLE IMAGE

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