



CERTIFICATE OF LIVE BIRTH

FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER

Register Number:

Province: Agusan del Norte  
City or Municipality: Buenavista

(a) Civil Registrar-General No. \_\_\_\_\_  
(b) Local Civil Registrar No. 70016-92

1. PLACE OF BIRTH  
a. PROVINCE: Agusan del Norte  
b. CITY OR MUNICIPALITY: Buenavista  
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address)  
d. IS PLACE OF BIRTH INSIDE CITY LIMITS?  
Yes  No

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)  
a. PROVINCE: Agusan del Norte  
b. CITY OR MUNICIPALITY: Buenavista  
c. NUMBER AND STREET: Barangay 7  
d. IS RESIDENCE INSIDE CITY LIMITS? Yes  No   
e. IS RESIDENCE ON A FARM? Yes  No

3. NAME (Type or print) First: RONNEL Middle: VALDEZA Last: CABARRUBIAS  
4. SEX: M  
5a. THIS BIRTH: SINGLE  TWIN  TRIPLET   
5b. IF TWIN OR TRIPLET, WAS CHILD: 1st  2nd  3rd   
6. DATE OF BIRTH: Month: Nov, Day: 18, Year: 1982  
7. NAME: First: JOSE Middle: Dion Last: CABARRUBIAS  
8. AGE (At time of this birth): 26  
9. BIRTHPLACE: Buenavista, Agusan  
10. RELIGION: R.C.  
11. NATIONALITY: Filipino  
12. USUAL OCCUPATION: Student  
13. KIND OF BUSINESS OR INDUSTRY: - - -

14. MAIDEN NAME: First: Barbara Middle: Valdeza Last: Valdeza  
15. AGE (At time of this birth): 22  
16. BIRTHPLACE: Davao City  
17. RELIGION: I.N.C.  
18. NATIONALITY: Filipina  
19. USUAL PLACE OF BIRTH: Davao  
17a. INFORMANT'S SIGNATURE: JOSE D. CABARRUBIAS  
17b. NAME IN PRINT: JOSE D. CABARRUBIAS  
17c. ADDRESS: Barangay 7, Bca., Agusan del Norte  
18. MOTHER'S MAILING ADDRESS (Number, Street, City or Municipality, Province):  
Barangay 7, Buenavista, Agusan del Norte

19. I HEREBY CERTIFY that I attended the birth of this child who was born alive at 9:45 o'clock A.M. on the day above indicated.  
a. SIGNATURE: [Signature]  
b. NAME IN PRINT: EULOGIA A. JARAMILLO  
c. ADDRESS: Buenavista, Agusan del Norte  
d. DATE SIGNED BY ATTENDANT AT BIRTH: 11/28/82  
e. TITLE OF ATTENDANT AT BIRTH:  M.D.  Midwife  Nurse  Others (Specify):  
20. RECEIVED IN-TIME OFFICE OF THE LOCAL CIVIL REGISTRAR BY:  
a. SIGNATURE: [Signature]  
b. NAME IN PRINT: EULOGIA A. JARAMILLO  
c. TITLE OR POSITION: [Title]  
d. DATE: 11/28/82  
21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORTS:  
b. DATE WHEN GIVEN NAME WAS SUPPLIED:

22a. LENGTH OF PREGNANCY: 40 COMPLETED WEEKS  
22b. WEIGHT AT BIRTH: 6 Lbs. 5 Oz.  
22c. LEGITIMATE:  Yes  No  
24. DATE AND PLACE OF BIRTHS OF PARENTS (For legitimate birth):  
July 28, 1982  
(Month) (City or Municipality) (Province)  
Buenavista, Agusan del Norte  
25. THIS CERTIFICATE IS PREPARED BY:  
SIGNATURE: [Signature]  
NAME IN PRINT: EULOGIA A. JARAMILLO  
TITLE OR POSITION:  
DATE:

(SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES)

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BEST POSSIBLE IMAGE



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Carmelita N. Ericta  
CARMELITA N. ERICTA  
Administrator and Civil Registrar General  
National Statistics Office