



(Copy for OCRG)

LEGITIMATED BY VIRTUE OF SUBSEQUENT MARRIAGE OF PARENTS ROBERT E. LICANDA AND LIZA C. YBAÑEZ ON SEPTEMBER 16, 2000 AT MANDAUE CITY, CEBU UNDER REGISTRY NUMBER 2001-4. THE CHILD SHALL BE KNOWN AS: ROBELIZA YBAÑEZ LICANDA

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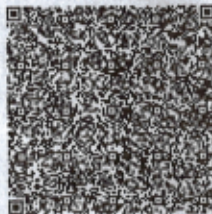
Ms. Edith R. Garcia, Chief, Document Management Division

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
<p align="center">Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL CERTIFICATE OF LIVE BIRTH</p> <p align="center"><small>(Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in items 2, 5a, 6b and 19c.)</small></p>					
Province <u>CEBU</u>		Registry No. <u>20414</u>			
City/Municipality <u>CEBU CITY</u>					
1. NAME (First) (Middle) (Last) <u>ROBELIZA</u> <u>CASES</u> <u>YBAÑEZ</u>		2. SEX 1 Male <input type="checkbox"/> 2 Female <input checked="" type="checkbox"/>		For OCRG USE ONLY Population Reference No. <u>212-00PT124-9</u>	
3. DATE OF BIRTH <u>27 JULY 2000</u>		4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province) <u>CEBU PUEB. CENTER & MATERNITY HOUSE, INC., CEBU CITY, CEBU</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
5a. TYPE OF BIRTH 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc. <input type="checkbox"/>		b. IF MULTIPLE BIRTH, CHILD WAS 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify <input type="checkbox"/>		41 <u>000020414</u>	
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>FIRST</u>		d. WEIGHT AT BIRTH <u>2,120</u> grams		42 <input type="checkbox"/>	
6. MOTHER'S NAME (First) (Middle) (Last) <u>LIZA</u> <u>CASES</u> <u>YBAÑEZ</u>		7. CITIZENSHIP <u>FIL.</u>		8. RELIGION <u>ROMAN CATHOLIC</u>	
9a. Total number of children born alive: <u>1</u>		b. No. of children still living including this birth: <u>1</u>		c. No. of children born alive but are now dead: <u>0</u>	
10. OCCUPATION <u>HOUSEWIFE</u>		11. Age at the time of this birth: <u>20</u> years		43 <input checked="" type="checkbox"/> <u>27042000</u>	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>541 ORCHID ST., HOLY NAME, MABOLO, CEBU CITY, CEBU</u>		13. NAME (First) (Middle) (Last) <u>ROBERT</u> <u>ENCLONAR</u> <u>LICANDA</u>		44 <input type="checkbox"/>	
14. CITIZENSHIP <u>FIL.</u>		15. RELIGION <u>ROMAN CATHOLIC</u>		45 <input type="checkbox"/>	
16. OCCUPATION <u>WAITER</u>		17. Age at the time of this birth: <u>22</u> years		46 <input type="checkbox"/>	
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>NOT MARRIED</u>		19a. ATTENDANT 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" type="checkbox"/> 4 Midlet (Traditional/Midwife) <input type="checkbox"/> 5 Others (Specify) <input type="checkbox"/>		47 <input type="checkbox"/>	
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>6:53</u> o'clock am/pm on the date stated above.		Signature: <u>Edgardo Amor E. Gamo</u> Name in Print: <u>EDGARDO AMOR GAMO, M.D.</u> Title or Position: <u>PHYSICIAN</u>		48 <input type="checkbox"/>	
20. INFORMANT Signature: <u>Liza Cases</u> Name in Print: <u>LIZA C. CASES</u> Relationship to the child: <u>MOTHER</u>		Address: <u>541 ORCHID ST., HOLY NAME, MABOLO, CEBU CITY</u> Date: <u>JULY 27, 2000</u>		49 <input type="checkbox"/>	
21. PREPARED BY Signature: <u>Stanley E. Libor</u> Name in Print: <u>STANLEY E. LIBOR</u> Title or Position: <u>CLERK</u> Date: <u>JULY 27, 2000</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: <u>Robert Cases</u> Name in Print: <u>ROBERT CASES</u> Title or Position: <u>REGISTRAR</u> Date: <u>AUG 08 2000</u>		50 <input checked="" type="checkbox"/> <u>000064</u>	

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

