

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

(Fill out completely, accurately, and legibly in ink. Use appropriate units of time.)

REMARKS/ANNOTATION

Place of Birth: Zamboanga City, Province of Zamboanga
Municipality: Zamboanga City
Registry No: 2004-11211

For OFFICE USE ONLY
Registration Reference No.

TO BE FILLED UP AT THE
OFFICE OF THE CIVIL
REGISTRAR

Sex: Male
Date of Birth: 01/01/2004
Time of Birth: 07:00

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Place of Birth: Zamboanga City
Municipality: Zamboanga City
Date of Birth: 01/01/2004
Time of Birth: 07:00

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Mother's Name: MARIA A. DELA CRUZ
Father's Name: JOSE M. DELA CRUZ

53

CITIZENSHIP: Filipino
RELIGION: Roman Catholic

55

1. Number of children born to mother: 2
2. Date of birth of child: 01/01/2004

61

3. Age of child: 0 years

64

4. Sex of child: Male

68

5. Date of registration: 01/01/2004

72 74

6. Signature of Registrar: [Signature]

76 79

7. Signature of Informant: [Signature]

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19a. ATTENDANT
X 1 Physician
4 Midwife (Traditional Midwife)

85 87

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at [Location] on the date stated above.

89 91

Signature: REGINA S. MENDOZA
Name in Print: REGINA S. MENDOZA
Title or Position: Medical Officer III
Date: June 30, 2004

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20. INFORMANT
Signature: GENA A. MENDOZA
Name in Print: GENA A. MENDOZA
Relationship to the child: other
Address: Iloilo City, Iloilo City
Date: June 30, 2004

21. PREPARED BY
22. RECEIVED AT THE OFFICE OF