



Municipal Form No. 102 (Revised 1988)

REPUBLIC OF THE PHILIPPINES CERTIFICATE OF LIVE BIRTH

(To be accomplished in triplicate)

(Fill out completely, accurately and legibly in ink or typewriter)

OCRG No. 13-1057018 05/22/07 01:30:48 PM

PURSUANT TO THE DECISION RENDERED BY CCR MARIA SHEILA CALMA TORRES DATED JULY 22, 2013 AND AFFIRMED BY CRG UNDER OCRG NO. 13-1057018, THE CHILD'S MIDDLE NAME AND MOTHER'S LAST NAME ARE HEREBY CORRECTED FROM "MENGUILLANO" TO "MENGUILLON", AND THE MOTHER'S MIDDLE NAME IS LIKEWISE CORRECTED FROM "RUBIS" TO "RUBIS".

PROVINCE NEG. OCC. LOCAL CIVIL REGISTRY NO. 92-4969

CITY/MUNICIPALITY SILAY CITY

1. NAME (First) SANDRICK (Middle) MENGUILLANO (Last) VILLAVARDE

2. SEX (Place 'X' on appropriate answer) X 1 Male 2 Female 3. DATE OF BIRTH (Day) 16 (Month) November (Year) 1992

4. PLACE OF BIRTH (Name of Hospital/Institution; if not in/hospital give street/barangay) DJCLMD (City/Municipality) SILAY CITY (Province) NEG. OCC.

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) X 1 Single 2 Twin 3 Thrs or more. b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc. N/A

6. MAIDEN NAME (First) MARGALINA (Middle) ROB ID (Last) MENGUILLANO 7. NATIONALITY FIL. 8. RELIGION R.C.

9. NAME (First) MERCURY (Middle) ALUMANON (Last) VILLAVARDE 10. NATIONALITY FIL. 11. RELIGION R.C.

12. DATE AND PLACE OF MARRIAGE OF PARENTS (important if not applicable, fill Affidavit of Acknowledgment at the back).

13. CERTIFICATE OF ATTENDANT AT BIRTH September 15, 1990 Talisay, Neg. Occ.

I hereby certify that I attended the birth of the child, who was born alive at 1:55 o'clock a.m./p.m. on the date stated above.

Signature [Signature] Name in print JUDITH CHUA M. Title or position Medical Officer Date November 16, 1992

14. INFORMANT Signature [Signature] Name in print MARCELINA VILLAVARDE Relationship to child Mother Date November 16, 1992

15a. PREPARED BY Signature [Signature] Name in print CRISENTA P. GUARZON Title or position RECORDS OFFICER X Date November 16, 1992

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR Signature [Signature] Name in print WAMON S. VILLAVARDE Title or position CIVIL REGISTRAR Date November 16, 1992

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT N/A b. DATE WHEN INFORMATION WAS SUPPLIED

Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar

PROVINCE NEG. OCC. Local Civil Registry No. 9209969 Registration Status 16

CITY/MUNICIPALITY SILAY CITY

17. Weight at Birth (in grams) 3289 gms. 18. Birth Order of Child (first, second, etc.) 3rd

19a. Total Number of Children Born Alive 22 b. How many children are now living including this birth? 3 c. How many children were born alive but are now dead? 0

20. Usual Occupation Housekeeper 21. Age at the time of this Birth 31

22. Usual Residence (Barangay) Carmela Valley Homes Subd., Talisay Neg. Occ. 23. Usual Occupation Driver 24. Age at the time of this Birth 35

25. Attendant at Birth (Place 'X' on appropriate answer) X 1 Physician 2 Nurse 3 Midwife 4 Midg 5 Others

Sex 1 Male 2 Female Date of Birth 11/16/92 Place of Birth DJCLMD Mother's Nationality 1 Filipino 2 Other Father's Nationality 1 Filipino 2 Other

NAME OF CHILD First SANDRICK M.L. Last VILLAVARDE

'IPAKITA SA MUNDO, UMAASENSO NA TAYO'

RESERVE FOR BINDING

MS. EDITH R. ORCILLA Chief, Document Management Division