

(Copy for OCRG)

OCRG No. 14-1154401  
09/04/2014 02:55:42 PM

PURSUANT TO THE DECISION RENDERED BY CCR ANELDA C. FLORENTINO DATED APRIL 30, 2014 AND AFFIRMED BY CRG UNDER  
OCRG NO. 14-1154401, THE MOTHER'S AND INFORMANT'S FIRST NAMES ARE HEREBY CORRECTED FROM "MARIEVEN" TO  
"MARBEN".

(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, 6b and 19a.)

Province Metro Manila Registry No. 2005-7629  
City/Municipality Pasay City

CHILD	1. NAME (First) <u>AINSLEY</u> (Middle) <u>GIDUQUIO</u> (Last) <u>TUICO</u>
	2. SEX <input type="checkbox"/> 1 Male <input checked="" type="checkbox"/> 2 Female
	3. DATE OF BIRTH (day) <u>23</u> (month) <u>sept.</u> (year) <u>1998</u>
MOTHER	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>Pasay City, Metro Manila</u>
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.
	b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify _____
FATHER	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>1st</u>
	d. WEIGHT AT BIRTH <u>27.22</u> grams
	6. MARDEN NAME (First) <u>MARIEVEN</u> (Middle) <u>GIDUQUIO</u> (Last) <u>TUICO</u>
7. CITIZENSHIP <u>Filipino</u>	8. RELIGION <u>Roman Catholic</u>
9a. Total number of children born alive: _____	b. No. of children still living including this birth: <u>1</u>
10. OCCUPATION <u>None</u>	c. No. of children born alive but are now dead: <u>0</u>
11. Age at the time of this birth: <u>21</u> years	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Pasay City, Metro Manila</u>
13. NAME (First) <u>Unknown</u> (Middle) _____ (Last) _____	14. CITIZENSHIP <u>N.A.</u>
15. RELIGION <u>N.A.</u>	16. OCCUPATION <u>N.A.</u>
17. Age at the time of this birth: <u>N.A.</u> years	18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>N.A.</u>
19a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" type="checkbox"/> 4 Hilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify) _____	19b. CERTIFICATION OF BIRTH (herby certify that I attended the birth of the child who was born alive at <u>10:25</u> a.m. o'clock am/pm on the date stated above.) Signature: <u>[Signature]</u> Address: <u>ISTRAR GE...</u> Name in Print: <u>YORIC ESTRO</u> Date: _____ Title or Position: _____
20. INFORMANT Signature: <u>[Signature]</u> Address: <u>171-B Cabrerros St. Pasak, Cebu City</u> Name in Print: <u>Marieven G. Tuico</u> Date: <u>AUG 8, 2009</u> Relationship to the child: <u>Mother</u>	21. PREPARED BY Signature: <u>[Signature]</u> Address: _____ Name in Print: <u>[Name]</u> Date: <u>AUG 08 2005</u> Title or Position: _____
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: <u>[Signature]</u> Address: _____ Name in Print: <u>DIKISIMA S SANTIAGO</u> Date: <u>NOV 2 2009</u> Title or Position: <u>CITY CIVIL REGISTRAR</u>	

REMARKS/ANNOTATION  
**BLAYED REGISTER**  
RECEIVED FEBRUARY 20 2014  
OFFICE OF THE CIVIL REGISTRAR

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[Grid of boxes for data entry]

MS. EDITHA R. ORCILLA  
Chief, Document Management Division