



OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

(Completed in Spanish/Arabic using black ink)

Registry No. 2014 26416	
Child's Name (First, Middle, Last) ADRIANNE SAGUBAN COCA	
Sex (Male/Female) MALE	Date of Birth (Day, Month, Year) 6 AUGUST 2014
Place of Birth (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province) VICENTE SOTTO MEMORIAL MEDICAL CENTER / B. RODRIGUEZ ST., CEBU CITY, CEBU	
Type of Birth (Single, Twin, Triplet, etc.) SINGLE	If Multiple Birth, Child Was (First, Second, Third, etc.) N/A
Birth Order (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.) 4TH	
Weight at Birth 2,950 grams	
Mother's Name (First, Middle, Last) AILEEN RUALES SAGUBAN	
Citizenship FILIPINO	
Religion/Religious Sect ROMAN CATHOLIC	
10a. Total number of children born alive 4	10b. No. of children still living including this birth 3
10c. No. of children born alive but are now dead 1	11. Occupation CALL CENTER AGENT
12. Age at the time of this birth (completed years) 29	
Residence (House No., St., Barangay) (City/Municipality) (Province) (Country) CASUNTINGAN, MANDAUE CITY, CEBU PHILIPPINES	
Father's Name (First, Middle, Last) ANDRE HABEL COCA	
Citizenship FILIPINO	
Religion/Religious Sect ROMAN CATHOLIC	
Occupation DRIVER	
18. Age at the time of this birth (completed years) 27	
Residence (House No., St., Barangay) (City/Municipality) (Province) (Country) CASUNTINGAN, MANDAUE CITY, CEBU PHILIPPINES	
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)	
20a. DATE (Month) (Day) (Year) JANUARY 18, 2007	20b. PLACE (City / Municipality) (Province) (Country) CASUNTINGAN, MANDAUE CITY, CEBU
21a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Hilot (Traditional Birth Attendant) <input type="checkbox"/> 5 Others (Specify)	
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.) I hereby certify that I attended the birth of the child who was born alive at: 1:06 AM am/pm on the date of birth specified above.	
Signature: <i>[Signature]</i> Address: VSMMMC, CEBU CITY, CEBU	
Name in Print: MA. ANGELICA MARTHA MARTINEZ, MD	
Title or Position: MEDICAL OFFICER III Date: 8/6/2014	
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief.	23. PREPARED BY
Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
Name in Print: ANDRE H. COCA	Name in Print: ALONA J. MONTEJO
Relationship to the Child: FATHER	Title or Position: CLERK
Address: MANDAUE CITY, CEBU	Date: 8/6/2014
Date: 8/6/2014	
24. RECEIVED BY Signature: <i>[Signature]</i>	25. REGISTERED BY THE CIVIL REGISTRAR Signature: <i>[Signature]</i>
Name in Print: LUZ N. CUGAY	Name in Print: PHILIPP A. MEGARON
Title or Position: Administrative Aide III	Title or Position: REGISTRATION OFFICER IV
Date: AUG 28 2014	Date: AUG 28 2014
REMARKS/ANNOTATIONS (For LCRO/CRG Use Only)	
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR	
8 9 11 13 15 16 17 19	

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BEST POSSIBLE IMAGE

BReN
02217-B14Q60R-5

Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General