



(Copy for OCR)

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

(Fill out completely, accurately and legibly. Use ink or green color.  
Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)

Province: SOUTHERN LEYTE Registry No. 9500421  
City/Municipality: ANAHAWAN

1. NAME (First) (Middle) (Last)  
MA. CRISTINA KUIZON LAMOSTE

2. SEX 1 Male  2 Female 3. DATE OF BIRTH (day) (month) (year)  
12th Dec. 1995

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province)  
Anahawan District Hospital Anahawan, So. Leyte

5a. TYPE OF BIRTH  1 Single  2 Twin  3 Triplet, etc.  
b. IF MULTIPLE BIRTH CHILD WAS  1 First  2 Second  3 Others, Specify

c. BIRTH ORDER (live births and fetal deaths including this delivery) First (First, middle, d., third, etc.)  
d. WEIGHT AT BIRTH 2,700 grams

6. MAIDEN NAME (First) (Middle) (Last)  
Leonivel Kuizon Lamoste

7. CITIZENSHIP Filipino 8. RELIGION R. Catholic

9a. Total number of children born alive: 01 b. No. of children still being included: 01 c. No. of children born alive but are now dead: None

10. OCCUPATION Housekeeper 11. Age at the time of this birth: 24 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
No. Anahawan, St. Bernard, So. Leyte

13. NAME (First) (Middle) (Last)  
S/A

14. CITIZENSHIP N/A 15. RELIGION S/A

16. OCCUPATION N/A 17. Age at the time of this birth: \_\_\_\_\_ years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not intended, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
ILLEGITIMATE

19a. ATTENDANT  1 Physician  2 Nurse  3 Midwife  
 4 Non-Traditional Midwife  5 Others (Specify)

19b. CERTIFICATION OF BIRTH (I hereby certify that I attended the birth of the child who was born alive at 1:45 o'clock PM on the date stated above.)

Signature: [Signature] Address: Anahawan Dist. Hospital Anahawan, So. Leyte  
Name in Print: BLAS O. REYES JR. M.D. Date: December 13, 1995  
Title or Position: Medical Officer III

20. INFORMANT Signature: [Signature] Address: No. Anahawan, St. Bernard, So. Leyte  
Name in Print: LEONIVEL F. LAMOSTE Date: December 13, 1995  
Relationship to the child: Mother

21. PREPARED BY Signature: [Signature] Name in Print: RODRIGO H. ANG  
Title or Position: Clerk Date: December 13, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: [Signature] Name in Print: MARTINA S. AETGO  
Title or Position: Lead Civil Registrar Date: December 13, 1995

REMARKS/ANNOTATION	
For CCRG USE ONLY: Population Reference No. <u>PRU 6401-A95ZC01-2</u>	
TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
41	<u>9500421</u>
42	<u>2</u>
43	<u>121295</u>
44	<u>04019</u>
45	<u>1</u>
46	<u>012676</u>
47	<u>1</u>
48	<u>010100</u>
49	<u>720</u>
50	<u>24</u>
51	<u>04121</u>
52	<u>1</u>
53	<u>1</u>
54	<u>0570</u>
55	<u>APP</u>
56	<u>77</u>
57	<u>121395</u>
58	<u>2</u>
59	<u>1</u>

LEGITIMATED BY VIRTUE OF SUBSEQUENT MARRIAGE OF PARENTS SALVADOR G. UY, JR. AND LEONIVEL K. LAMOSTE ON SEPTEMBER 09, 1998 AT SAINT BERNARD, SOUTHERN LEYTE UNDER REGISTRY NUMBER 2010-7. THE CHILD SHALL BE KNOWN AS: MA. CRISTINA LAMOSTE UY  
SID: 0F0A1F39C4CE13A3E1040E12927239E42E0275  
MS. EDITH R. CALIGALA  
Chief, Civil Registrar Office  
04/24/2012 05:31:33 PM

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BEST POSSIBLE IMAGE



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Documentary  
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Lisa Grace S. Bersales  
LISA GRACE S. BERSALES, Ph.D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority