



(Copy for OCRG)

(To be accomplished in quadruplicate)

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH 1938
1920

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

Province: <u>Cebu City</u>		Registry No. <u>016-22988</u>	REMARKS/ANNOTATION FOR OCRA USE ONLY: Population Registration No. TO BE FILED IN THE OFFICE OF THE CIVIL REGISTRAR: 9 6 2 9 8 2 8 2 2 6 1 1 7 6 3 2 1 7 8 0 1 2 8 1 0 0 1 0 1 0 0 2 2 0 3 1 2 2 1 7 8 9 8 5 3 4 12/06/92 12/23/96
1. NAME (First, Middle, Last) <u>Betsaida Jorguia Durango</u>		2. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	
3. DATE OF BIRTH (Key: (month) day) <u>Nov. 26, 1996</u>			
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution, City/Municipality, Province) <u>Saint Vincent General Hospital - Cebu City</u>			
5a. TYPE OF BIRTH <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Triplet, etc.	5b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1. First <input type="checkbox"/> 2. Second <input type="checkbox"/> 3. Others, Specify		
6. BIRTH ORDER (live births and fetal deaths including this delivery) <u>FIRST</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>2,810</u> grams		
6. MAIDENS' NAME (First, Middle, Last) <u>Venina Mellon Jorguia</u>			
7. CITIZENSHIP <u>Filipino</u>	8. RELIGION <u>Catholic</u>		
9a. Total number of children born alive: <u>1</u>	b. No. of children still living including this birth: <u>1</u>	c. No. of children born alive but are now dead: <u>0</u>	
10. OCCUPATION <u>Housewife</u>	11. Age at the time of this birth: <u>31</u> years		
12. RESIDENCE (House No., Street, Barangay, City/Municipality, Province) <u>Maracas Lahug, Cebu City</u>			
13. NAME (First, Middle, Last) <u>Armando Academia Durango</u>		14. CITIZENSHIP <u>Filipino</u>	
15. RELIGION <u>Catholic</u>		16. OCCUPATION <u>Company driver</u>	
17. Age at the time of this birth: <u>34</u> years		18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>August 6, 1992 - Talisay, Cebu</u>	
19a. ATTENDANT <input checked="" type="checkbox"/> 1. Physician <input type="checkbox"/> 2. Nurse <input type="checkbox"/> 3. Midwife <input type="checkbox"/> 4. Pilot (Traditional Midwife) <input type="checkbox"/> 5. Others (Specify)		19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>9:53 P.M.</u> o'clock am/pm on the date stated above. Signature: <u>Dr. Cecilia Indoclos</u> Address: <u>c/o Saint Vincent General Hospital</u> Name in Print: <u>Attending Physician</u> Date: <u>November 26, 1996</u> Title or Position:	
20. INFORMANT Signature: <u>Venina J. Durango</u> Address: <u>Maracas Lahug, Cebu City</u> Name in Print: <u>Mother</u> Date: <u>November 26, 1996</u> Relationship to the child:		21. PREPARED BY Signature: <u>William V. Jumao-as</u> Name in Print: <u>Clerk</u> Title or Position: <u>Clerk</u> Date: <u>November 26, 1996</u>	
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: <u>EVELYN A. ABAINO</u> Name in Print: <u>CLERK</u> Title or Position: <u>CLERK</u> Date: <u>DEC 23 1996</u>			

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BEST POSSIBLE IMAGE

Carmelita N. Ericta
CARMELITA N. ERICTA