(Copy for OCRG)

(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, 5b and 19b.)

Province: CEBU
City/Municipality: CEBU CITY

Registry No. 98 18972

REMARKS/ANNOTATION

(To be filled up by OCRG)

CHILD

1. NAME: (First) SAMSON JULIUS (Middle) – (Last) EBARBIA
2. SEX: 1 Male 2 Female
3. DATE OF BIRTH: (day) 27 (month) July (year) 1998
4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/House No., Street, Barangay) VICENTE SOTTO MEMORIAL MED. CENTER (City/Municipality) CEBU CITY (Province) CEBU
5a. TYPE OF BIRTH: 1 Single 2 Twin 3 Triplet, etc.
5b. IF MULTIPLE BIRTH, CHILD WAS: 1 First 2 Second 3 Others, Specify
6. BIRTH ORDER (for births and total deaths including this delivery): Fourth (first, second, third, etc.)
6d. WEIGHT AT BIRTH: 3280 grams

MOTHER

8. MAIDEN NAME: (First) JOCELYN (Middle) CAMPUGAN (Last) EBARBIA
7. CITIZENSHIP: Filipino
8. RELIGION: R.Catholic
9a. Total number of children born alive: 4
9b. No. of children still living including this birth: 4
9c. No. of children born alive but are now dead: -0-
10. OCCUPATION: None
11. Age at the time of this birth: 23 years
12. RESIDENCE: (House No., Street, Barangay) (City/Municipality) (Province)

FATHER

13. NAME: (First) UNKNOWN (Middle) (Last)
14. CITIZENSHIP: N.S.
15. RELIGION: N.S.
16. OCCUPATION: None
17. Age at the time of this birth: 25 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the Back.)
Not applicable

CIVIL REGISTRAR

19a. ATTENDANT: 1 Physician 2 Nurse 3 Midwife 4 Hilot (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 9:53 AM o'clock a.m./p.m. on the date stated above.
Signature: [signature]
Name in Print: MA. MELISSA D. MALIN
Title or Position: Med Officer III
Address: VSMMC CEBU CITY CEBU
Date: 29 July 1998
20. INFORMANT
Signature: [signature]
Name in Print: JOCELYN EBARBIA
Relationship to Child: Mother
Address: caballes Upd. GUADALUPE CEBU CITY CEBU
Date: 29 July 1998
21. PREPARED BY:
Signature: [signature]
Name in Print: KARLA RODRILLA
Title or Position: Nurse
Date: 29 July 1998
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: LORNA L. SOMITO
Title or Position: MARRIAGE OFFICER
Date: JUL 31 98

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LEGITIMATED BY VIRTUE OF SUBSEQUENT MARRIAGE OF PARENTS SAMSON P. SAMSON AND JOCELYN C. EBARBIA ON FEBRUARY 10, 2001 AT MAHAYAG, ZAMBOANGA DEL SUR UNDER REGISTRY NUMBER 2013-1798. THE CHILD SHALL BE KNOWN AS: SAMSON JULIUS EBARBIA SAMSON

MS. EDITHA R. ORCILLA
Chief, Document Management Division

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BReN