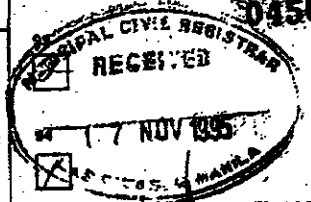
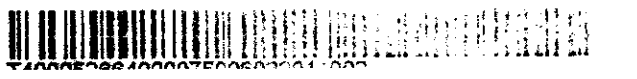


| | | |
|---|--|--|
| Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL CERTIFICATE OF BIRTH REGISTRATION <small>(This certificate, when duly and legally filed, is of evidence. There is a corresponding certificate issued in Books 2, 3, 5, and 102.)</small> | | REMARKS/ANNOTATION TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR |
| Province: <u>LAGUNA</u> City/Municipality: <u>LAGUNA PINAS</u> | Registry No.: <u>35-09993</u> | |
| 1. NAME (First) (Middle) (Last) <u>MIKHAIL</u> <u>CRISTINA</u> <u>ALO</u> | For OCHA Use Only: Population Reference No. | |
| 2. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | 3. DATE OF BIRTH (Day) (Month) (Year) <u>02</u> <u>OCTOBER</u> <u>1995</u> | 41 9 5 0 9 7 7 3 |
| 4. PLACE OF BIRTH (Name of hospital/clinic, city/municipality, province) CABINTE MATERNITY AND CHILDREN'S HOSPITAL - TALON, LAS PINAS, MM | | |
| 5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> 5th <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th <input type="checkbox"/> 9th <input type="checkbox"/> 10th | 5b. IF MULTIPLE BIRTH, CHILD VIAS <input type="checkbox"/> First <input checked="" type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify | 42 2 |
| 6. MAIDEN NAME (First) (Middle) (Last) <u>EMILIE</u> <u>OWANDA</u> <u>ALO</u> | | |
| 7. CITIZENSHIP <u>FILIPINO</u> | 8. RELIGION <u>ROMAN CATHOLIC</u> | 43 1 0 8 1 0 9 5 |
| 9a. Total number of children born alive: <u>ONE</u> | 9b. No. of children born including this birth: <u>N/A</u> | |
| 10. OCCUPATION <u>EMPLOYEE</u> | 11. Age at the time of this birth: <u>45</u> years | 45 1 |
| 12. RESIDENCE (Street No., Street, Barangay) (City/Municipality) (Province) <u>229 GEN. CARANON ST. SOLDIERO BLDG. TALON, LAS PINAS</u> | | |
| 13. NAME (First) (Middle) (Last) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <u>NA</u> | 14. CITIZENSHIP <u>NA</u> 15. RELIGION <u>NA</u> | |
| 16. OCCUPATION <u>NA</u> | 17. Age at the time of this birth: <u>NA</u> years | 46 1 1 |
| 18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Single Status, and attach to the back.) <u>NA</u> | | |
| 19. CERTIFICATION OF BIRTH I hereby certify that I am a duly qualified civil registrar and was born alive at <u>7:30</u> o'clock on <u>02</u> <u>OCTOBER</u> <u>1995</u> at <u>MARCOS ALVAREZ AVE. TALON, LAS PINAS, MM</u> . Signature: <u>[Signature]</u> Title: <u>CIVIL REGISTRAR</u> | | 47 7 6 0 1 8 |
| 20. INFORMANT Name: <u>[Signature]</u> Address: <u>529 Gen. Caranon St. Soldiero Bldg. Talon, Las Pinas</u> Signature: <u>[Signature]</u> Title: <u>CIVIL REGISTRAR</u> | | |
| 21. PREPARED BY Signature: <u>[Signature]</u> Title: <u>CIVIL REGISTRAR</u> | | 48 1 9 9 9 4 5 |
| 22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: <u>[Signature]</u> Title: <u>CIVIL REGISTRAR</u> Date: <u>7 NOV 1995</u> | | |



DATE OF REGISTRATION: 07 DEC 1995

05286-DA-10000-P-00750-B-002
BEST POSSIBLE IMAGE



BR#1
0760-199502-2
Documentary
Stamp Tax Paid

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

