



REPUBLIC OF THE PHILIPPINES  
**CERTIFICATE OF LIVE BIRTH**

(To be accomplished in triplicate)

(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. 011  
 CITY/MUNICIPALITY Lapu-lapu

1. NAME (First) (Middle) (Last)  
EVANGELINE IGOT YBAÑEZ  
 2. SEX (Place 'X' on appropriate answer) 3. DATE OF BIRTH (Day) (Month) (Year)  
 1 Male  2 Female 16 March 1963

4. PLACE OF BIRTH (Name of Hospital/Institution: if not in/hospital, give street/barangay) (City/Municipality) (Province)  
Sangi Lapu-lapu Cebu

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) b. IF MULTIPLE BIRTH, CHILD WAS  
 1 Single  2 Twin  3 Three or more.  1 First  2 Second  3 Third, 4th, etc.

Father	6. MAIDEN NAME (First) (Middle) (Last) <u>Fermina</u> <u>Igot</u>	7. NATIONALITY <u>Filipino</u>	8. RELIGION <u>R. C.</u>
	9. NAME (First) (Middle) (Last) <u>Pablo</u> <u>Ybanez</u>	10. NATIONALITY <u>Filipino</u>	11. RELIGION <u>R. C.</u>

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back).  
October 20, 1942 - Lapu-lapu City

13. CERTIFICATE OF ATTENDANT AT BIRTH  
 I hereby certify that I attended the birth of the child who was born alive at \_\_\_\_\_ o'clock a.m./p.m. on the date stated above.

Signature \_\_\_\_\_ Address Sangi, LLC  
 Name in print ROCELIO ADINA  
 Title or position HTLOJ Date 2-7-92

14. INFORMANT  
 Signature Fermina Ybanez Address Sangi, LLC  
 Name in print Fermina I. Ybanez  
 Relationship to child mother Date Feb. 7, 1992

15a. PREPARED BY b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR  
 Signature \_\_\_\_\_ Signature \_\_\_\_\_  
 Name in print Ma. Rene M. Basan Name in print RODOLFO C. BERAME, M. D., M. P. H.  
 Title or position Civil Registry Clerk Title or position CHOLCR  
 Date Feb. 7, 1992 Date March 16, 1992

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED  
 \_\_\_\_\_ 2/17/92

06535-HG-400JPP-00368-BI007  
 BEST POSSIBLE IMAGE



BReN  
 02226-A63FG04-9

Documentary  
 Stamp Tax Paid

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



**AFFIDAVIT OF ACKNOWLEDGMENT**

(Both parents of the mother alone may accomplish the Affidavit)

We/I, \_\_\_\_\_ and \_\_\_\_\_ parents/  
(Father) (Mother)

parent of the child mentioned in the Certificate of Live Birth, do hereby solemnly swear that the information contained herein are true and correct to the best of our/my knowledge and belief.

(Signature of Father)	(Signature of Mother)
Residence Certificate No. _____	Residence Certificate No. _____
Date Issued _____	Date Issued _____
Place Issued _____	Place Issued _____
SUBSCRIBED AND SWORN to before me this _____ day of _____ 19 _____	
(Signature of Administering Officer)	(Title/Designation)
(Name in Print)	(Address)

**AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH**

(Not applicable for births prior to February 27, 1951. Either the person himself if 21 years old or over, or father/mother/guardian may accomplish the affidavit.)

Fermina I. Ybanez, of legal age, single/married and with residence and postal address of Sangal, LLC, after having been duly sworn to in accordance with law, do hereby depose and say:

1. That I am the applicant for the delayed registration of my birth / of the birth of EVANGELINE I. YBANEZ
2. That I/he/she was born on March 16, 1963
3. That I/he/she is a citizen of the Philippines
4. That the reason for the delay in registering my/his/her birth was due to Negligence
5. That a copy of my/his/her birth certificate is needed for the purpose of Employment
6. a. (For the applicant only) That I am married to \_\_\_\_\_  
b. (For father/mother/guardian) That I am the father/mother/guardian of the said person.

(Signature of Affiant)	Residence Certificate No. <u>5152997</u>
(Signature of Affiant)	Date Issued <u>1/28/92</u> / Place Issued <u>LLC</u>
SUBSCRIBED AND SWORN to before me this <u>16th</u> day of <u>March</u> 19 <u>92</u>	
at <u>Lapu-Lapu City</u> , Philippines.	<b>CITY HEALTH OFFICER LOCAL CIVIL REGISTRAR</b>
(Signature of Administering Officer)	(Title/Designation)
<u>RODOLFO C. BERAME, M.D., M. P. H.</u>	<u>LAPU-LAPU CITY</u>
(Name in Print)	(Address)

**HOW TO ACCOMPLISH THIS FORM**

1. Accomplish this form in triplicate copies. Upon registration submit the original and duplicate copies to the Local Civil Registrar, and keep the third copy for your personal file.
2. Type or write legibly in ink on the blank spaces provided.
3. Fill up all items in this form completely and accurately.
4. For correctness and accuracy of data, the mother or the father shall be preferred as informant over any other person.
5. The informant shall be asked to sign item 14 of this form upon completion. Before doing so he should review the answers for each item and make sure that the entries made therein are all correct and that the name of the child as well as the names of the parents are correctly spelled.
6. Registration status refers to whether or not registration is delayed. If delayed, place '2' in box 15; otherwise place '1'

**PENALTY CLAUSE OF ACT NO. 3753**

**Section 16—False Statements**—Any person who shall knowingly make false statements in the forms furnished and shall present the entry in the civil registrar, shall be punished by imprisonment for not less than one month nor more than six, or by a fine of not less than two hundred pesos nor more than five hundred or both, in the discretion of the court.

**Section 17—Failure to Report—Other Violations**—Any person whose duty is to report any fact concerning the civil status of persons and who knowingly fails to perform such duty, and any person convicted of having violated any of the provisions of this Act, shall be punished by a fine of not less than ten nor more than two hundred pesos.

**Section 18—Neglect of Duty with Reference to the Provisions of this Act**—Any local civil registrar who fails to properly perform his duties in accordance with the provisions of this Act and of the regulations issued hereunder, shall be punished, for the first offense, by an administrative fine in a sum equal to his salary for not less than fifteen days nor more than three months, and for a second or repeated offense, by removal from the service.

06535-HG-400JPP-00368-BI007

BEST POSSIBLE IMAGE



T400065354000036811222017007

BReN  
02226-A63FG04-9

Documentary  
Stamp Tax Paid

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