(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(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 5, 5a, 5b, and 19a.)

REMARKS/ANNOTATION

Province: Cebu
City/Municipality: Mandaue City
Registry No.: CY-3493

For OCRG USE ONLY: Population Reference No.: 22<OAD<U201

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: 9503493

CHILD

1. NAME: (First) PHILIP (Middle) LEONIL (Last) ABADIA
2. SEX: X 1 Male ___ 2 Female
3. DATE OF BIRTH: (day) 2 (month) Oct. (year) 1995
4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/House No., Street, Barangay) Opao (City/Municipality) Mandaue City (Province) Cebu
5a. TYPE OF BIRTH: X 1 Single ___ 2 Twin ___ 3 Triplet, etc.
b. IF MULTIPLE BIRTH, CHILD WAS: ___ 1 First ___ 2 Second ___ 3 Others, Specify
c. BIRTH ORDER (give births and fetal deaths including this delivery): First (first, second, third, etc.)
d. WEIGHT AT BIRTH: 8.2 grams

42: 1
43: 1 | 02 | 10 | 95

MOTHER

6. MAIDEN NAME: (First) JOPE (Middle) MATBAGON (Last) ABADIA
7. CITIZENSHIP: FILIPINO
8. RELIGION: R.C
9a. Total number of children born alive: 3
b. No. of children still living including this birth: 3
c. No. of children born alive but are now dead: none
10. OCCUPATION: HOUSEWIFE
11. Age at the time of this birth: 26 years
12. RESIDENCE: (House No., Street, Barangay) CORTES COMPOUND OPAO MANDAUE (City/Municipality) CITY (Province)

44: 2 2 2 0 1
45: 1
46: 03
47: 3 7 2 0

FATHER

13. NAME: (First) ALFREDO (Middle) GUMOPGALA (Last) CINCOPLORES
14. CITIZENSHIP: FILIPINO
15. RELIGION: R.C.
16. OCCUPATION: MPD EMPLOYEE
17. Age at the time of this birth: 37 years

48: 1
49: 1
50: 0 3
51: 0 2
52: 2 0
53: 2 6

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.): N/A

19a. ATTENDANT: ___ 1 Physician ___ 2 Nurse ___ 3 Midwife X 4 Hilot (Traditional Midwife) ___ 5 Others (Specify)

54: 1 2 3 0 11

19b. CERTIFICATION OF BIRTH: I hereby certify that I attended the birth of the child who was born alive at 11:43 o'clock am/pm on the date stated above.
Signature: [illegible]
Name in Print: LEAH B. DARVIAS
Title or Position:
Address: Centro-4 Mandaue City
Date: 10-2-95

55: 1
56: 1
57: 1820
58: X-20
59: 9 9 6
60: 3 7

20. INFORMANT
Signature: [illegible]
Name in Print: IRENE M. ABADIA
Relationship to the child: MOTHER
Address: OPAO MANDAUE CITY
Date:

61: 2

21. PREPARED BY
Signature: [illegible]
Name in Print: LEAH B. DARVIAS
Title or Position: NURSE
Date: 10-2-95

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [illegible]
Name in Print: REGINA FE Q. CORALAN
Title or Position: OCRG CIVIL REGISTRAR
Date:

RECEIVED ORIGINAL
62: 4 DATE: 6-11-96

05262-C7-400MPD-01134-BI001

BReN
02230-A95U201-2

Documentary Stamp Tax Paid

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

BEST POSSIBLE IMAGE

T4000526240001134052920140O1

For births before 3 August 1988/on or after 3 August 1988

AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We, Geronimo Jay Cinco Flores and _____ parents/parent of the child mentioned in this 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)

Community Tax No. 8233025
Date Issued Dec. 26, 1994
Place Issued Pasay City

(Signature of Mother)

Community Tax No. _____
Date Issued _____
Place Issued _____

SUBSCRIBED AND SWORN to before me this _____ day of OCT 05 1995 at Manila City, Philippines.

(Signature of Administering Officer)

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Series of 1995

PRISCILIANO S. LUARCAS
NOTARY PUBLIC (Jurisdiction)
Until December 31, 1995
PTR No. 932067 - Jan. 4, 1995
IBP No. 143[illegible] - Quezon City

Not applicable for births before 27 February 1931

AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH

(Either the person himself if 18 years old or over, or father/mother/guardian may accomplish this affidavit.)

I, _____, of legal age, single/married and with residence and postal address at _____, 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 _____.
2. That I/he/she was born on _____ at _____
3. That I/he/she was attended at birth by _____ who resides at _____.
4. That I/he/she is a citizen of _____.
5. That my/his/her parents were ☐ married on _____ at _____
   ☐ not married but was acknowledge by my/his/her father whose name is _____.
6. That the reason for the delay in registering my/his/her birth was due to _____.
7. That a copy of my/his/her birth certificate is needed for the purpose of _____.
8. ☐ (For the applicant only) That I am married to _____
   ☐ (For the father/mother/guardian) That I am the _____ of the said person.

(Signature of Affiant)

Community Tax No. _____
Date Issued _____
Place Issued _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, Philippines.

(Signature of Administering Officer)

(Name in Print)

(Title/Designation)

(Address)

05262-C7-400MPD-01134-BI001

BEST POSSIBLE IMAGE

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