



(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 15a.)

Province <u>Cebu</u>		Registry No. <u>2006 35716</u>	REMARKS/ANNOTATION
City/Municipality <u>Cebu City</u>			
1. NAME (First (Middle) (Last) <u>Luke Vladimir Romaris Pepino</u>		2. SEX <u>X</u> 1 Male <u>      </u> 2 Female	For OCRG USE ONLY: Population Reference No.  <input type="text"/>
3. DATE OF BIRTH <u>08 December 2006</u>			
C H I L D	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) <u>House No. Street, Barangay) St. Vincent General Hospital, Cebu City</u>		To be filled up at the OFFICE OF THE CIVIL REGISTRAR
	5a. TYPE OF BIRTH <u>1</u> 1 Single <u>      </u> 2 Twin <u>      </u> 3 Triplet, etc.		
b. IF MULTIPLE BIRTH, CHILD WAS <u>      </u> 1 First <u>      </u> 2 Second <u>      </u> 3 Others, Specify <u>      </u>		<input type="text"/>	
c. BIRTH ORDER (Give births and fetal deaths including this delivery) <u>First</u> (First, second, third, etc.)		d. WEIGHT AT BIRTH <u>3055</u> grams	<input type="text"/>
6. MAIDEN NAME (First (Middle) (Last) <u>Betorbe Romane Romaris</u>		<input type="text"/>	
7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Catholic</u>	
M O T H E R	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>None</u>		11. Age at the time of this birth: <u>23</u> years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Sitio Sanbag, Lagtang, Talisay City, Cebu</u>		<input type="text"/>	
13. NAME (First (Middle) (Last) <u>Uydar Ynieto Pepino</u>		<input type="text"/>	
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Catholic</u>	
16. OCCUPATION <u>Technical Engineer</u>		17. Age at the time of this birth: <u>25</u> years	
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Affidavit of Paternity at the back.) <u>June 17, 2006 - St. Joseph Parish, Tabunok, Talisay City, Cebu</u>			
19a. ATTENDANT <u>1</u> 1 Physician <u>      </u> 2 Nurse <u>      </u> 3 Midwife <u>      </u> <u>      </u> 4 Mid (Traditional Healer) <u>      </u> 5 Others (Specify) <u>      </u>			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>4:42 a.m.</u> o'clock on/upon the date stated above.			
Signature <u>Dr. Evelyn Tang</u> Name in Print <u>Dr. Evelyn Tang</u> Title or Position <u>Attending Physician</u>		Address <u>c/o St. Vincent General Hospital, Cebu City</u> Date <u>December 5, 2006</u>	
20. INFORMANT Signature <u>[Signature]</u> Name in Print <u>not clear</u> Relationship to Birth <u>not clear</u>		Address <u>Sitio Sanbag, Lagtang, Talisay City, Cebu</u> Date <u>December 8, 2006</u>	
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>ESTRELLA MAGNAYA</u> Title or Position <u>CRG</u> Date <u>December 8, 2006</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>OSCAR B. HOLA</u> Title or Position <u>Registration Officer IV</u> Date <u>DEC 20 2006</u>	

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Lisa Grace S. Bersal  
LISA GRACE S. BERSALES, Ph.D.