



(Copy for OCRG)

Republic of the Philippines <b>OFFICE OF THE CIVIL REGISTRAR GENERAL</b> <b>CERTIFICATE OF LIVE BIRTH</b> <small>(Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in Items 2, 5a, 5b and 10a.)</small>		REMARKS/ANNOTATION  3826
Province <u>Ozamis City</u> City/Municipality _____	Registry No. <u>97-01099</u>	
1. NAME (First) <u>KRISTIAN</u> (Middle) _____ (Last) <u>GHIONG</u>		For OCRG USE ONLY: Population Reference No. <u>4210-A97ET02-8</u>
2. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	3. DATE OF BIRTH <u>27 March 1997</u> (month) (year)	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) _____ (City/Municipality) _____ (Province) _____ (House No., Street, Barangay) <u>Gango, Ozamis City, Misamis Occidental</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR  41 <u>9701099</u> 42 <u>1</u> 43 <u>1</u> 44 <u>270399</u> 45 <u>42101</u> 46 <u>1</u>
5a. TYPE OF BIRTH <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Triplet, etc.	5b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Others, Specify _____	
6. BIRTH ORDER (live births and total deaths including this delivery) <u>2nd</u> (first, second, third, etc.)	7. WEIGHT AT BIRTH <u>3232</u> grams	
6. MAIDEN NAME (First) <u>FERDINANDA</u> (Middle) _____ (Last) <u>PERNANDEZ</u>		47 <u>1</u> 48 <u>1</u> 49 <u>270399</u> 50 <u>42101</u> 51 <u>1</u>
7. CITIZENSHIP <u>Philippine</u>	8. RELIGION <u>Roman Catholic</u>	
9a. Total number of children born alive: <u>2</u>	9b. No. of children still living including this birth: <u>2</u>	52 <u>023232</u> 53 <u>1</u> 54 <u>1</u> 55 <u>020200</u> 56 <u>220</u> 57 <u>27</u> 58 <u>42101</u>
10. OCCUPATION <u>House Keeper</u>	11. Age at the time of this birth: <u>27</u> years	
12. RESIDENCE (House No., Street, Barangay) _____ (City/Municipality) _____ (Province) _____ <u>Brgy. Gango, Ozamis City, Mis. Occ.</u>		59 <u>1</u> 60 <u>1</u> 61 <u>020200</u> 62 <u>220</u> 63 <u>27</u> 64 <u>42101</u>
13. NAME (First) <u>ALLAN</u> (Middle) _____ (Last) <u>GHIONG</u>		
14. CITIZENSHIP <u>Philippine</u>		65 <u>1</u> 66 <u>1</u> 67 <u>020200</u> 68 <u>220</u> 69 <u>27</u> 70 <u>42101</u>
15. RELIGION <u>Catholic</u>		
16. OCCUPATION <u>Sea Man</u>		71 <u>1</u> 72 <u>1</u> 73 <u>020200</u> 74 <u>220</u> 75 <u>27</u> 76 <u>42101</u>
17. Age at the time of this birth: <u>37</u> years		
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>October 20, 1992, Ozamis City</u>		77 <u>1</u> 78 <u>1</u> 79 <u>020200</u> 80 <u>220</u> 81 <u>27</u> 82 <u>42101</u>
19a. ATTENDANT <input checked="" type="checkbox"/> Physician <input type="checkbox"/> Nurse <input type="checkbox"/> Midwife (Traditional/Modern) <input type="checkbox"/> Others (Specify) _____		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>4:45</u> a.m./p.m. on the date stated above.		83 <u>1</u> 84 <u>1</u> 85 <u>020200</u> 86 <u>220</u> 87 <u>27</u> 88 <u>42101</u>
Signature _____ OF _____ Name in Print _____ Address _____ Title or Position _____ Date _____		
20. INFORMANT _____ OF _____ Signature _____ OF _____ Name in Print _____ Address _____ Relationship to the child _____ Date _____		89 <u>1</u> 90 <u>1</u> 91 <u>020200</u> 92 <u>220</u> 93 <u>27</u> 94 <u>42101</u>
21. PREPARED BY _____ OF _____ Signature _____ OF _____ Name in Print _____ Address _____ Title or Position _____ Date _____		
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature _____ OF _____ Name in Print _____ Address _____ Title or Position _____ Date _____		95 <u>1</u> 96 <u>1</u> 97 <u>020200</u> 98 <u>220</u> 99 <u>27</u> 100 <u>42101</u>

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BEST POSSIBLE IMAGE

BREN  
04210-A97ET04-4

*CSM*  
CLAIRE DENNIS S. MAPA, Ph. D.  
National Statistician and Civil Registrar General