

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

Province CEBU	Registry No. 2020-10863
City/Municipality CEBU CITY	

CHILD	1. NAME (First) (Middle) (Last) EZEKIEL TYLER TOLENTINO GENTICA		
	2. SEX (Male / Female) MALE	3. DATE OF BIRTH (Day) (Month) (Year) 18 MAY 2020	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province) BULACAO HEALTH CENTER CEBU CITY CEBU		
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) SINGLE	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) N/A	5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.) FIRST

MOTHER	7. MAIDEN NAME (First) (Middle) (Last) MARICRIS SALIMBAGAT TOLENTINO			
	8. CITIZENSHIP FILIPINO		9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC	
	10a. Total number of children born alive 1	10b. No. of children still living including this birth 1	10c. No. of children born alive but are now dead 0	11. OCCUPATION HOUSEKEEPER
	12. AGE at the time of this birth (completed years) 23			
13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) CHARLIEVILLE, BULACAO CEBU CITY CEBU PHILIPPINES				

FATHER	14. NAME (First) (Middle) (Last) CHRIS JIBRIEL OPSAR GENTICA		
	15. CITIZENSHIP FILIPINO	16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC	17. OCCUPATION SALES REPRESENTATIVE
	18. AGE at the time of this birth (completed years) 24		
19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) CHARLIEVILLE, BULACAO CEBU CITY CEBU PHILIPPINES			

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)

20a. DATE (Month) (Day) (Year) NOT MARRIED	20b. PLACE (City / Municipality) (Province) (Country) N/A
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21a. ATTENDANT

____ 1 Physician ____ 2 Nurse 3 Midwife ____ 4 Hilot (Traditional Birth Attendant) ____ 5 Others (Specify) _____

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.)

I hereby certify that I attended the birth of the child who was born alive at **6:22 PM** am/pm on the date of birth specified above.

Signature *Emma B. Cabingatan* Address **BULACAO**
Name in Print **EMMA B. CABINGATAN** **CEBU CITY**
Title or Position **MIDWIFE IV** Date **MAY 18, 2020**

22. CERTIFICATION OF INFORMANT

I hereby certify that all information supplied are true and correct to my own knowledge and belief.

Signature *Maricris S. Tolentino*
Name in Print **MARICRIS S. TOLENTINO**
Relationship to the Child **MOTHER**
Address **CHARLIEVILLE, BULACAO CEBU CITY**
Date **MAY 18, 2020**

23. PREPARED BY

Signature *Emma B. Cabingatan*
Name in Print **EMMA B. CABINGATAN**
Title or Position **MIDWIFE IV**
Date **MAY 18, 2020**

24. RECEIVED BY

Signature *Luiz N. Cugay*
Name in Print **Administrative Aide III**
Title or Position **JUNO 1 2020**
Date **JUNO 1 2020**

25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature *Philippa Megabon*
Name in Print **PHILIPPA MEGABON**
Title or Position **REGISTRATION OFFICER IV**
Date **JUNO 1 2020**

REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)