



REPUBLIC OF THE PHILIPPINES
 OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

Province: CEBU		Registry No.: 2014-21325		
City/Municipality: CEBU CITY				
CHILD	1. NAME (First, Middle, Last) LIAM SAMEON INSO			
	2. SEX (Male/Female) MALE	3. DATE OF BIRTH (Day, Month, Year) 9 JULY 2014		
	4. PLACE OF BIRTH (Name of Hospital/Clinic, Building, House No., Barangay, City/Municipality, Province) CEBU PUER CENTER & MATERNITY HOUSE INC. CEBU CITY CEBU			
	5. TYPE OF BIRTH (Single/Twin/Other) SINGLE	6. MULTIPLE BIRTH CHILD WAS (First/Second/Third) 1st	7. BIRTH ORDER (Ranking by Birth Date) FIRST	8. WEIGHT AT BIRTH (grams) 2,900
MOTHER	9. MAIDEN NAME (First, Middle, Last) ASTRID DAYDAY SAMEON			
	10. CITIZENSHIP FILIPINO	11. RELIGION/RELIGIOUS SECT. CHURCH OF CHRIST		
	12. Total number of children born alive 1	13. No. of children born alive but already dead 0	14. OCCUPATION CALL CENTER AGENT	
	15. RESIDENCE (House No., St., Barangay, City/Municipality, Province) ST. BERNADETTE BASAK LAPU-LAPU CITY CEBU PHILS			
FATHER	16. NAME (First, Middle, Last) SOLIMAN SANCHEZ INSO			
	17. CITIZENSHIP FILIPINO	18. RELIGION/RELIGIOUS SECT. ROMAN CATHOLIC		
	19. RESIDENCE (House No., St., Barangay, City/Municipality, Province) 8 2ND ST. TRES DE ABRIL MUEL PUNTA PRINCERA CEBU CITY CEBU PHILS		20. OCCUPATION CIVIL ENGINEER	
	21. AGE at the time of the birth (complete years) 31			
MARRIAGE OF PARENTS (If not married, a complete Affidavit of Acknowledgement/Admission of Paternity at the back of this form is required.) 20a. DATE (Month, Day, Year) MARCH 15, 2014 20b. PLACE (City/Municipality, Province) LAPU-LAPU CITY CEBU PHILS				
21a. ATTENDANT <input checked="" type="checkbox"/> Physician <input type="checkbox"/> Nurse <input type="checkbox"/> Midwife <input type="checkbox"/> Healer (Traditional Birth Attendant) <input type="checkbox"/> Others (Specify) _____				
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, or Other) hereby certify that I attended the birth of a child who was born alive at 11:35AM on the date of birth specified above.				
Signature: <i>[Signature]</i> Name in Print: MAE ELISER W.D. Title or Position: PHYSICIAN		Address: CEBU PUER CNTR & MATERNITY HOUSE INC. CEBU CITY Date: 9 JULY 2014		
22. CERTIFICATION OF INFORMANT (I hereby certify that the information reported is true and correct to my own knowledge and belief.) Signature: <i>[Signature]</i> Name in Print: ASTRID S. INSO Relationship to the Child: MOTHER Address: BASAK LAPU-LAPU CITY CEBU Date: 9 JULY 2014		23. PREPARED BY Signature: <i>[Signature]</i> Name in Print: CLARISA T. ROXAS Title or Position: CLERK Date: 9 JULY 2014		
24. RECEIVED BY Signature: <i>[Signature]</i> Name in Print: LIZEN CUGAY Title or Position: ADMINISTRATIVE AIDE III Date: 10 JUL 14 2014		25. REGISTERED BY THE CMC REGISTRAR Signature: <i>[Signature]</i> Name in Print: PHILIP A. MEGABON Title or Position: REGISTRATION OFFICER IV Date: 10 JUL 14 2014		
REMARKS/ANNOTATIONS (For LCRO/OCRO Use Only)				
TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR 8 9 10 11 12 13 14 15 16 17				

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BEST POSSIBLE IMAGE



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Lisa Grace S. Bersales
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 National Statistician and Civil Registrar General
 Philippine Statistics Authority