



(Copy for OCRG)

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION Into Registration	
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 19a.)					
Province Neues Oriental			Registry No. 111-122		
City/Municipality Tayasan					
CHILD	1. NAME (First) (Middle) (Last) CELAVEL ELEDIA MALALAY		For OCRG USE ONLY: Population Reference No.		
	2. SEX ___ 1 Male <input checked="" type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) 15 July 1996		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) Natu-er, Tayasan, Ne. Or.		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR		
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single ___ 2 Twin ___ 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS ___ 1 First ___ 2 Second ___ 3 Others, Specify		
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.)		d. WEIGHT AT BIRTH _____ grams		
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) LYDIA ZUNIFIA ELEDIA		41 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
	7. CITIZENSHIP Filipino		8. RELIGION Church of Christ		
	9a. Total number of children born alive: 2		b. No. of children still living including this birth: 2		c. No. of children born alive but are now dead: 0
	10. OCCUPATION Housekeeping		11. Age at the time of this birth: 21 years		
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) Natu-er, Tayasan, Ne. Or.		48 <input type="checkbox"/>		
FATHER	13. NAME (First) (Middle) (Last) BENEDICTO TULABING MALALAY		49 <input type="checkbox"/> 50 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
	14. CITIZENSHIP Filipino		15. RELIGION Roman Catholic		
	16. OCCUPATION Laborer		17. Age at the time of this birth: 24 years		
	18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) 30 June 1994 - Tayasan, Neues Oriental		56 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
	19a. ATTENDANT ___ 1 Physician ___ 2 Nurse ___ 3 Midwife <input checked="" type="checkbox"/> 4 Hilot (Traditional Midwife) ___ 5 Others (Specify)		61 <input type="checkbox"/>		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at 10:15 o'clock am/pm on the date stated above.		62 <input type="checkbox"/> 64 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
Signature _____ Name in Print MARCELINA CAJUAL Title or Position Trad. Midwife		Address Natu-er, Tayasan, Neues Oriental Date _____			
20. INFORMANT Signature _____ Name in Print LYDIA S. MALALAY Relationship to the child Mother		Address Natu-er, Tayasan, Neues Oriental Date 26 December 2000			
21. PREPARED BY Signature _____ Name in Print EDIE S. CALLAO Title or Position UV-1/Clerk Desistente Date 26 December 2000		65 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature _____ Name in Print LUZVIMBA A. TRUJILLO Title or Position Man. Civil Registrar Date 11 Jan 2001		66 <input type="checkbox"/> 67 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
		68 <input type="checkbox"/> 69 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
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		86 <input type="checkbox"/> 87 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
		88 <input type="checkbox"/> 91 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
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		94 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			

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BEST POSSIBLE IMAGE

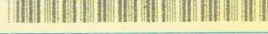


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Carmelita N. Ericta
 CARMELITA N. ERICTA
 Administrator and Civil Registrar General
 National Statistics Office





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

AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We/I, _____ 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) _____ (Signature of Mother)
 Community Tax No. _____ Community Tax No. _____
 Date Issued _____ Date Issued _____
 Place Issued _____ Place Issued _____

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

 (Signature of Administering Officer) _____ (Title/Designation)

 (Name in Print) _____ (Address)

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, **LYDIA F. MALALAY**, of legal age, single/married
 and with residence and postal address at **Mata-on, Tayasan, Neg. Or.**
 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 **CHELVEL F. MALALAY**
2. That I/he/she was born on **15 July 1996** at **Mata-on, Tayasan, Neg. Or.**
3. That I/he/she was attended at birth by **Marcelina Cabral** who resides at **Mata-on, Tayasan, Negros Oriental**
4. That I/he/she is a citizen of **Philippines**
5. That my/his/her parents were married on **30 June 1994** at **Tayasan, Negros Oriental**
 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 **negligence of the person concerned**
7. That a copy of my/his/her birth certificate is needed for the purpose of **birth record purposes**
8. (For the applicant only) That I am married to _____
 (For the father/mother/guardian) That I am the **mother** of the said person.

 (Signature of Affiant)
 Community Tax No. **06231608**
 Date Issued **12-26-2000**
 Place Issued **Tayasan, Negros Oriental**

SUBSCRIBED AND SWORN to before me this **26th** day of **December**, **2000**
 at **Tayasan, Negros Oriental**, Philippines.

 (Signature of Administering Officer) **Municipal Civil Registrar**
LUZVISMIDA A. TROPILE (Title/Designation)

 (Name in Print) **Tayasan, Negros Oriental**
 _____ (Address)

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 Administrator and Civil Registrar General
 National Statistics Office

