



Municipal Form No. 102  
Revised January 1993

(To be accomplished in quadruplicate)

(Copy for OCRG)

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 10a.)

Province <u>CEBU</u>		Registry No. <u>2002 27258</u>	
City/Municipality <u>CEBU CITY</u>			
1. NAME <u>MA. ZARA</u> (Middle) <u>FERNANDEZ</u> (Last) <u>TANICA</u>		For OCRG USE ONLY: Population Reference No.	
2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>22 SEPTEMBER 2002</u>	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>CEBU PUER. CENTER &amp; MATERNITY HOUSE, INC., CEBU CITY, CEBU</u>			
5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify	
c. BIRTH ORDER (five births and fetal deaths including this delivery) (first, second, third, etc.) <u>SECOND</u>		d. WEIGHT AT BIRTH <u>2,800</u> grams	
6. MAIDEN NAME (First) (Middle) (Last) <u>MA. BELLA</u> <u>BENONGO</u> <u>FERNANDEZ</u>		7. CITIZENSHIP <u>FIL.</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>		9c. No. of children born alive but are now dead: <u>0</u>	
10. OCCUPATION <u>ACCTS. RECEIVABLE ANALYST</u>		11. Age at the time of this birth: <u>24</u> years	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>AFAS LAHUG</u> <u>CEBU CITY</u> <u>CEBU</u>			
13. NAME (First) (Middle) (Last) <u>BENIGNO</u> <u>ORAT</u> <u>TANICA</u>		14. CITIZENSHIP <u>FIL.</u>	
15. RELIGION <u>ROMAN CATHOLIC</u>		16. OCCUPATION <u>DRIVER</u>	
17. Age at the time of this birth: <u>26</u> years		18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>JANUARY 4, 2000</u> <u>CEBU CITY</u>	
19a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Hilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>2:37</u> o'clock <u>am/pm</u> on the date stated above.			
Signature <u>[Signature]</u> Name in Print <u>LORESS BADO, M.D.</u> Title or Position <u>PHYSICIAN</u> Date <u>SEPTEMBER 22, 2002</u>		Signature <u>[Signature]</u> Name in Print <u>CEBU PUER. CENTER &amp; MATERNITY HOUSE, INC., CEBU CITY</u> Title or Position <u>PHYSICIAN</u> Date <u>SEPTEMBER 22, 2002</u>	
20. INFORMANT Signature <u>[Signature]</u> Name in Print <u>MA. BELLA F. TANICA</u> Relationship to the child <u>MOTHER</u> Address <u>AFAS LAHUG</u> City/Municipality <u>CEBU CITY, CEBU</u> Date <u>SEPTEMBER 22, 2002</u>		21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>MARTANILLA O. BERNANDEZ</u> Title or Position <u>CLERK</u> Date <u>SEPTEMBER 22, 2002</u>	
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>COUETT R.</u> Title or Position <u>REGISTRAR</u> Date <u>SEP 2002</u>		000009	

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BEST POSSIBLE IMAGE  
T400040914000019203152011002  
X6500792126

BReN  
02217-802TN1B-6  
Documentary  
Stamp Tax Paid

[Signature]  
CARMELITA N. ERICTA  
Administrator and Civil Registrar General  
National Statistics Office



NBI

Republic of the Philippines  
Department of Justice  
National Bureau of Investigation

66629199

NO. 0000  
T520MVA20-JM1134847

EXPIRES  
November 26, 2023

FAMILY NAME  
TANICA

LAST NAME  
MA ZAIRA

MIDDLE NAME  
FERNANDEZ

WIFE'S SURNAME

ADDRESS  
PUROK STAR APPLE BRGY UMAPAD MANDAUE CITY CEBU

DATE OF BIRTH  
September 22, 2002

PLACE OF BIRTH  
CEBU CITY

CITIZENSHIP  
FILIPINO

MARITAL STATUS  
SINGLE

PURPOSE  
MULTI-PURPOSE CLEARANCE

REMARKS  
NO DEROGATORY RECORD

PERSONAL COPY

SEX  
FEMALE

Signature

QR Code

Fingerprint

Date Printed: Friday, December 1, 2023 10:05:00

Signed: *Eric B. Distor*  
ERIC B. DISTOR  
NBI Director - CIC

CLASS: *www*      OFFICE: *www*  
CIC No: *www*      PCIC: *www*  
D.R. No: *www*      NBI No: *www*  
NET No: *www*

Barcode  
T520MVA20-JM1134847



BIR VERIFICATION SLIP



**BUREAU OF INTERNAL REVENUE**

Revenue District No. 080

2nd Floor Insular Square Bldg., J.P. Rizal St.,  
Tabok, Mandaue City

**TIN VERIFICATION**

Query Results

TIN : 511 640059  
NAME : Ms. Zaira F. Tanica  
DATE OF BIRTH : Sept. 22, 2002  
ADDRESS : Unpad

RDO CODE : 047

TAXPAYER CLASSIFICATION :  LOCAL EMPLOYEE

Cell No. :  ONETT

E.O. 98


Email Add. :  BUSINESS

PROFESSIONAL

*RLM*  
RYAN JUDE R. LIM, CPA  
Revenue Officer

BIR, RDO 080 MANDAUE CITY

CERTIFICATION

 **UNIVERSITY OF CEBU**  
LAPULAPU AND MANDAUE

**OFFICE OF THE REGISTRAR**

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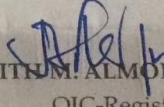
**CERTIFICATION**

TO WHOM IT MAY CONCERN:

This is to certify that per records on file in this office, TAÑICA, MA. ZAIRA F.  
with Learner Reference Number (LRN) 1404351150078 has satisfactorily completed  
Senior High School of this institution under Accountancy, Business and Management (ABM)  
as of July 27, 2021 (Special Order has been applied for).

This certification is issued upon his/her request for employment  
purposes only.

Given this 11<sup>th</sup> day of May, 2022 at the University of Cebu - Lapulapu  
and Mandaue, Looc, Mandaue City.

  
JUDITH M. ALMONTE, MBA  
OIC-Registrar

not valid without  
official UCLM seal  
OR. NO. 2477744  
SFM-REG-011-00

*"Any mark, erasure or alteration invalidates this certification."*

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A.C. Cortes Avenue, Looc Mandaue City, Cebu, Philippines 6014 • Tel. Nos. (032) 345-6666 / 346-7450 • Fax No. (032) 346-7462  
Email: registrar.lm@uc.edu.ph • website: www.uc.edu.ph



# Sketch of Residence

