



CERTIFICATE OF LIVE BIRTH

Fill out completely, accurately, legibly in ink or typewriter

12  
10

Register Numbers

(a) Civil Registrar-General No. \_\_\_\_\_  
(b) Local Civil Registrar No. 1767-77

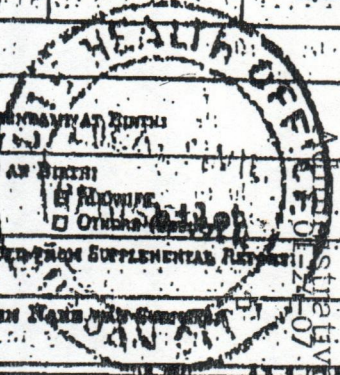
Province: Agusan  
City or Municipality: Butuan City

|                                                                              |                    |                                                                     |                    |
|------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------|--------------------|
| 1. PLACE OF BIRTH                                                            |                    | 2. USUAL RESIDENCE OF MOTHER (Where does mother live?)              |                    |
| a. PROVINCE                                                                  | <u>Agusan</u>      | a. PROVINCE                                                         | <u>Agusan</u>      |
| b. CITY OR MUNICIPALITY                                                      | <u>Butuan City</u> | b. CITY OR MUNICIPALITY                                             | <u>Butuan City</u> |
| 3. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address) |                    | 4. NUMBER AND STREET                                                |                    |
| <u>Taguibo, Butuan City</u>                                                  |                    | <u>Taguibo, Butuan City</u>                                         |                    |
| 5. IS PLACE OF BIRTH INSIDE CITY LIMITS?                                     |                    | 6. IS RESIDENCE ON A FARM?                                          |                    |
| Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>          |                    | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                    |

|                                 |                   |                                    |                       |
|---------------------------------|-------------------|------------------------------------|-----------------------|
| 7. NAME (Type or print)         |                   | 8. DATE OF BIRTH                   |                       |
| <u>MARILYN LAGUMBAY NEMENIO</u> |                   | <u>April 18, 1972</u>              |                       |
| 9. SEX                          | 10. TYPE OF BIRTH | 11. IF TWIN OR TRIPLET, WAS CHILD, | 12. DATE AT BIRTH     |
| <u>F</u>                        | <u>SINGLE</u>     | <u>1st</u>                         | <u>April 18, 1972</u> |
| 13. NAME OF FATHER              |                   | 14. NAME OF MOTHER                 |                       |
| <u>Jose Casapong Nemenio</u>    |                   | <u>Rosa Cath. Lagumbay</u>         |                       |
| 15. AGE (At time of birth)      |                   | 16. USUAL OCCUPATION               |                       |
| <u>35</u>                       |                   | <u>Farmer</u>                      |                       |
| 17. BIRTHPLACE                  |                   | 18. KIND OF BUSINESS OR INDUSTRY   |                       |
| <u>Negros Oriental</u>          |                   | <u>None</u>                        |                       |

|                                                               |  |                                                                          |  |
|---------------------------------------------------------------|--|--------------------------------------------------------------------------|--|
| 19. NAME OF FATHER                                            |  | 20. NAME OF MOTHER                                                       |  |
| <u>Rosa Cath. Lagumbay</u>                                    |  | <u>Rosa Cath. Lagumbay</u>                                               |  |
| 21. AGE (At time of birth)                                    |  | 22. BIRTHPLACE                                                           |  |
| <u>30</u>                                                     |  | <u>Hinundayan, Leyte</u>                                                 |  |
| 23. PREVIOUS DELIVERIES TO MOTHER (Do not include this birth) |  | 24. HOW MANY CHILDREN ARE NOW LIVING?                                    |  |
| <u>4</u>                                                      |  | <u>4</u>                                                                 |  |
| 25. HOW MANY OTHER CHILDREN WERE BORN ALIVE BUT ARE NOW DEAD? |  | 26. HOW MANY (total) deaths (stillborn, dead any time after conception)? |  |
| <u>0</u>                                                      |  | <u>0</u>                                                                 |  |

|                                                                   |  |                                        |  |
|-------------------------------------------------------------------|--|----------------------------------------|--|
| 27. INFORMANT'S SIGNATURE                                         |  | 28. SIGNATURE OF ATTENDANT AT BIRTH    |  |
| <u>Louderdes M. Gonzaga R.M.</u>                                  |  | <u>Maria Toral</u>                     |  |
| 29. ADDRESS                                                       |  | 30. ADDRESS                            |  |
| <u>Butuan City</u>                                                |  | <u>Butuan City</u>                     |  |
| 31. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:       |  | 32. DATE WHEN GIVEN NAME WAS CORRECTED |  |
| <u>Salavrus A. Lim</u>                                            |  | <u>June 20, 1972</u>                   |  |
| 33. LENGTH OF PREGNANCY                                           |  | 34. WEIGHT AT BIRTH                    |  |
| <u>10</u>                                                         |  | <u>3.20</u>                            |  |
| 35. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimated birth) |  | 36. THIS CERTIFICATE IS PREPARED BY:   |  |
| <u>November 15, 1962</u>                                          |  | <u>Angelita Lao Calo</u>               |  |
| 37. DATE                                                          |  | 38. DATE                               |  |
| <u>June 20, 1972</u>                                              |  | <u>June 20, 1972</u>                   |  |



CERTIFIED CORRECT

REMARKS: PURSUANT TO THE DECISION RENDERED BY CCR JUDITH ALVIZO-CAJO DATED MAY 30, 2006 AND AFFIRMED BY CCR UNDER OCG NO. 06-0323198, THE CHILD'S AND FATHER'S LAST NAME IS HEREBY CORRECTED FROM NEMENIO TO NEMENIO AND THE FATHER'S MIDDLE NAME FROM CASIPONG TO CASIPONG.

CHIEF OF BUREAU