(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

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: Samar
City/Municipality: Hinabangan
Registry No. 2010-667

REMARKS/ANNOTATION

LATE REGISTRATION

CHILD

1. NAME (First) JAIME (Middle) ABANAG (Last) CABALLERO
2. SEX: X 1 Male ___ 2 Female
3. DATE OF BIRTH (day) (month) (year): 04 DECEMBER 1969
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) BRGY.LIM-AO (City/Municipality) HINABANGAN (Province) SAMAR

5a. TYPE OF BIRTH: X 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.): 1ST
d. WEIGHT AT BIRTH: 3175 grams

MOTHER

6. MAIDEN NAME (First) ROSALINDA (Middle) NABUAL (Last) ABANAG
7. CITIZENSHIP: FILIPINO
8. RELIGION: ROMAN CATHOLIC
9a. Total number of children born alive: 01
b. No. of children still living including this birth: 01
c. No. of children born alive but are now dead: 0
10. OCCUPATION: HOUSEWIFE
11. Age at the time of this birth: 18 years
12. RESIDENCE (House No., Street, Barangay) BRGY. LIM-AO (City/Municipality) HINABANGAN (Province) SAMAR

FATHER

13. NAME (First) ARTEMIO (Middle) ORIO (Last) CABALLERO
14. CITIZENSHIP: FILIPINO
15. RELIGION: ROMAN CATHOLIC
16. OCCUPATION: Farmer
17. Age at the time of this birth: 17 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
FORGOTTEN

19a. ATTENDANT
___ 1 Physician ___ 2 Nurse ___ 3 Midwife
X 4 Hilot (Traditional Midwife) ___ 5 Others (Specify)

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at ________ o'clock am/pm on the date stated above.
Signature: Forgotten
Name in Print:
Title or Position:
Address:
Date:

20. INFORMANT
Signature: [signature]
Name in Print: JAIME A. CABALLERO
Relationship to the child: Personal
Address: BRGY.LIM-AO HINABANGAN, SAMAR
Date:

21. PREPARED BY
Signature: [signature]
Name in Print: MELBA A. NABLO
Title or Position: Admin.Aide 1
Date: Nov 4, 2010

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: ANGELITA B. DAVANTES
Title or Position: MUN.CIVIL REGISTRAR
Date: Nov 4, 2010

2010667	2	1 0 4 1 2 6 9	6 0 0 8 7
1	0 1 0 7 1 5	1 1	0 1 0 1 0 0
2 2 0	1 8	6 0 0 8 7	1 1
6 1 9	1 7	1	4

04108-41-425EAC-00157-BI004

BReN
06008-A69Y401-2

BEST POSSIBLE IMAGE

T425041084250015704012011004

Documentary Stamp Tax Paid

[signature]
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* ROSALINDA NABUAL ABANAG *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)

Community Tax No. _____
Date Issued _____
Place Issued _____

ROSALINDA N. ABANAG
(Signature of Mother)

Community Tax No. _____
Date Issued _____
Place Issued _____

SUBSCRIBED AND SWORN *to before me this* _____ *day of* _____, 2010
at HINABANGAN, SAMAR, Philippines.

_____
(Signature of Administering Officer)

_____
(Name in Print)

MUN. CIVIL REGISTRAR
(Title/Designation)

HINABANGAN, SAMAR
(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, JAIME ABANAG CABALLERO, of legal age, single/married and with residence and postal address at BRGY. LIM-AO HINABANGAN, SAMAR, 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 JAIME ABANAG CABALLERO
2. That I/he/she was born on DECEMBER 04, 1969 at BRGY. LIM-AO HINABANGAN, SAMAR
3. That I/he/she was attended at birth by _____ who resides at _____
4. That I/he/she is a citizen of PHIL.
5. That my/his/her parents were ☐ married on _____ at _____
   ☐ 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 LACK OF TIME
7. That a copy of my/his/her birth certificate is needed for the purpose of REGISTRATION
8. ☐ (For the applicant only) That I am married to _____
   ☐ (For the father/mother/guardian) That I am the PERSONAL of the said person.

JAIME ABANAG CABALLERO
(Signature of Affiant)

Community Tax No. 04704637
Date Issued 12-09-2010
Place Issued Hinabangan, Samar

SUBSCRIBED AND SWORN *to before me this* 15th *day of* November, 2010
at HINABANGAN, SAMAR, Philippines.

_____
(Signature of Administering Officer)

ANGELITA B. DAVANTES
(Name in Print)

MUN. CIVIL REGISTRAR
(Title/Designation)

HINABANGAN, SAMAR
(Address)

04108-41-425EAC-00157-BI004

BEST POSSIBLE IMAGE

T4250410842500157040120110O4

BReN
06008-A69Y401-2

Documentary
Stamp Tax Paid

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