

(COPY FOR OCRG)

Municipal Form No. 97 (Form No. 13) (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL CERTIFICATE OF MARRIAGE					
Province <u>Metro Manila</u>			Registry No. <u>2004-14597</u>		
City/Municipality <u>Quezon City</u>					
Name of Contracting Parties	(first) (middle initial) (last)		(first) (middle initial) (last)		
	Jerry D. Imbong		Leonora A. Caliao		
Date of Birth/Age	(day) (month) (year)	(age)	(day) (month) (year)	(age)	
	03 10 1975	28	03 11 1972	31	
Place of Birth	Cebu City		Naval, Biliran		
Sex (Male or Female)	Male		Female		
Citizenship	Filipino		Filipino		
Residence	#42 C. Kapiligan St., Quezon City		Dona Imelda		
Religion	Roman Catholic		Roman Catholic		
Civil Status	Single		Single		
Name of Father	(first) (middle initial) (last)	(first) (middle initial) (last)			
	Ernesto P. Imbong	Benito H. Caliao			
Citizenship	Filipino		Filipino		
Name of Mother	(first) (middle initial) (last)	(first) (middle initial) (last)			
	Estela P. Imbong	Leonora A. Caliao			
Citizenship	Filipino		Filipino		
Persons who gave consent or advice	(first) (middle initial) (last)	(first) (middle initial) (last)			
Relationship					
Residence					

Place of Marriage Our Lady of Perpetual Help Shrine
Lower Everlasting St. Piyack Sarangan at the Shrine of
19 June 2004 Address 3:00 P.M.
 Date: (day) (month) (year) Time:

THIS IS TO CERTIFY: Jerry D. Imbong
Leonora A. Caliao
 and I, Leonora A. Caliao, both of legal age, of our own free will
 and accord, and in the presence of the person solemnizing this marriage and of the witnesses named below, take
 each other as husband and wife and certifying further that we:

- ☐ have not entered into a marriage settlement.
☐ have entered into a marriage settlement, a copy of which is hereto attached.

19 IN WITNESS WHEREOF, we signed/signed/signed with our finger print, this certificate in quadruplicate this
 day of June 2004
Jerry D. Imbong Leonora A. Caliao
 (Signature of Husband) (Signature of Wife)

THIS IS TO CERTIFY: THAT BEFORE ME, on the date and place above-written, personally appeared
 the above-mentioned parties, with their mutual consent, lawfully joined together in marriage which was solemnized
 by me in the presence of the witnesses named below, all of legal age.

I CERTIFY FURTHER THAT: 187466 May 25, 2004
☐ Quezon City issued on May 25, 2004 in favor of said parties, was exhibited to me.
☐ no marriage license was necessary, the marriage being solemnized under
 Art. 200 of Executive Order No. 200.
☐ the marriage was solemnized in accordance with the provisions of Presidential
 Decree No. 1083
Rev. Fr. Glenon B. Guimbal, EMSF
 (Signature of Solemnizing Officer)

Eastern Missionaries of St. Francis-ORSOWHDP9-Dec. 31'05
 Religious Affiliation, Registry No. and Expiration Date, if applicable:
 WITNESSES
 (Print Name and Signature) Ricardo A. ... Olivia Y. Yalung

07030-46-003EFR-03983-MI005

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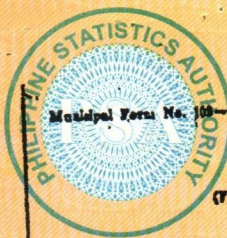
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Lisa Grace S. Bersales
 LISA GRACE S. BERSALES, Ph.D.
 National Statistician and Civil Registrar General
 Philippine Statistics Authority





Municipal Form No. 100 (Revised Dec. 1, 1944)

REPUBLIC OF THE PHILIPPINES

(TO BE ACCOMPLISHED IN DUPLICATE)

CERTIFICATE OF LIVE BIRTH

(FILL OUT COMPLETELY, ACCURATELY LEGIBLY IN INK OR TYPEWRITER)

LCR No. _____

(Municipality or City)

(Province)

Province: Cebu
City or Municipality: Cebu City

Register Number:

(a) Civil Registrar-General No. _____

(b) Local Civil Registrar No. 16462-75

1. Place of Birth		2. Usual Residence of Mother (Where does mother live?)	
a. Province	<u>Cebu</u>	a. Province	<u>Cebu</u>
b. City or Municipality	<u>Cebu City</u>	b. City or Municipality	<u>Lapulapu City</u>
c. Name of Hospital or Institution (If not in hospital, give street Address)		c. Number and Street	
<u>Cebu Puer. Center & Mat. House Inc.</u>		<u>451 - Bonifacio St.</u>	
d. Is Place of Birth Inside City Limits?		e. Is Residence on a Farm?	
Yes ☒ No ☐		Yes ☒ No ☐	
3. Name (Type or print)			
First <u>TERRY</u> Middle <u>DEGOLLACION</u> Last <u>IMBONG</u>			
4. Sex	5a. Date Birth	5b. If Twin or Triplet, was Child	6. Date of Birth
<u>M</u>	<u>Single</u> ☒ <u>Twin</u> ☐ <u>Triplet</u> ☐	1st ☐ 2nd ☐ 3rd ☐	Month <u>Oct</u> Day <u>3</u> Year <u>1975</u>
7. Name	8. Nationality	9a. Age (At time of this birth)	9b. Kind of Business or Industry
First <u>ERNESTO</u> Middle <u>PAHUGOT</u> Last <u>IMBONG</u>	<u>Phil.</u>	Years <u>25</u>	<u>Mechanic</u>
10. Birthplace	11a. Usual Occupation	11b. Kind of Business or Industry	
<u>Lapulapu City</u>	<u>Mechanic</u>		
12. Maiden Name	13. Nationality	13a. Race	
First <u>ESTERA</u> Middle <u>BARIENTOS</u> Last <u>DEGOLLACION</u>	<u>Phil.</u>	<u>BROWN</u>	
14. Age (At time of this birth)	15. Birthplace	16. Previous Deliveries to Mother (Do not include this birth)	
Years <u>28</u>	<u>Lapulapu City</u>	<u>1</u>	
17a. Informant's Signature:	17b. How many children are now living?	17c. How many other children were born alive but are now dead?	17d. How many fetal deaths (fetuses born dead any time after conception)?
<u>Esthera D. Imbong</u>	<u>1</u>	<u>0</u>	<u>0</u>
b. Name in print:	18. Mother's Mailing (Address: Number, Street, City or Municipality, Province)		
<u>ESTERA IMBONG</u>	<u>451 - Bonifacio St. Lapulapu City, Cebu</u>		
c. Address:	19. I Herewith Certify that I attended the birth of this child who was born alive at <u>8:00</u> o'clock <u>P.</u> on the date above indicated.		
	a. Signature: <u>LUCIA F. NUNO, M.D.</u>		
	b. Name in Print: <u>LUCIA F. NUNO, M.D.</u>		
	c. Address: <u>Cebu Puer. Center & Mat. House Inc.</u>		
20. Received in the Office of the Local Civil Registrar by:	d. Date Signed by Attendant at Birth:		
a. Signature:	e. Title of Attendant at Birth:		
b. Name in Print:	☐ M. D. ☐ Midwife		
c. Title or Position:	☐ Nurse ☐ Others (Specify)		
d. Date:	21. a. Given Name Added from Supplemental Report:		
	b. Date When Given Name was Supplied:		
22a. Length of Pregnancy	22b. Weight at Birth	22c. Legitimate	
<u>9 mos.</u> Completed Weeks	<u>5</u> Lbs. <u>13</u> Oz.	☒ Yes ☐ No	
23. Date and Place of Marriage of Parents (For legitimate birth)	24. This Certificate is Prepared by:		
Month <u>July</u> Day <u>3</u> Year <u>1971</u>	Signature: <u>DELFINA V. NUNOZA</u>		
City or Municipality <u>Lapulapu City</u> Province <u>Cebu</u>	Name in Print: <u>DELFINA V. NUNOZA</u>		
	Title or Position: <u>Clerk</u>		
	Date: <u>October 3, 1975</u>		

IMPORTANT: DO NOT DETACH. LOCAL CIVIL REGISTRAR MUST ACCOMPLISH THIS PORTION

1 (a).	<u>3210</u>
1 (b).	<u>1</u>
1 (c).	<u>321.2</u>
2.	<u>1</u>
2 (c).	<u>0</u>
4.	<u>3</u>
5 (a).	<u>3</u>
5 (b).	<u>3</u>
6.	<u>1</u>
8.	<u>75</u>
9.	<u>312</u>
11 (a).	<u>312</u>
11 (b).	<u>28</u>
13.	<u>2</u>
16 (a).	<u>2</u>
16 (b).	<u>2</u>
16 (c).	<u>1</u>
19 (c).	<u>1</u>
22 (a).	<u>1</u>
22 (b).	<u>1</u>
23.	<u>3510</u>

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