(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: SOUTHERN LEYTE
City/Municipality: Saint Bernard
Registry No. 95-137

CHILD

1. NAME (First) GLENDA LORAINE (Middle) (Last) SUMIPO
2. SEX: X 1 Male 2 Female
3. DATE OF BIRTH (day) 27 (month) July (year) 1993
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): Brgy. Himbangan, Saint Bernard, So. Leyte
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.): FIRST
d. WEIGHT AT BIRTH: ?-Pounds grams

MOTHER

6. MAIDEN NAME (First) GLORIA (Middle) TARE (Last) SUMIPO
7. CITIZENSHIP: Filipino
8. RELIGION: Roman Catholic
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: -
10. OCCUPATION: Housekeeper
11. Age at the time of this birth: 32 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): Brg.y. Himbangan, Saint Bernard, So. Leyte

FATHER

13. NAME (First) LORENZO (Middle) C. (Last) SOBRIO
14. CITIZENSHIP: Filipino
15. RELIGION: Roman Catholic
16. OCCUPATION: Security Guard
17. Age at the time of this birth: 30 years

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

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 4:30-Pm o'clock am/pm on the date stated above.

Signature [redacted]
Name in Print: SOLEDAD PAG-IWAYAN
Title or Position: Traditional Midwife
Address: Himbangan, St. Bernard, Southern Leyte
Date: July 23, 1993

20. INFORMANT
Signature: (signed)
Name in Print: [redacted]LORIA T. SUMIPO
Relationship to the child: Mother
Address: Himbangan, St. Bernard Southern Leyte
Date: Jan. 20, 1995

21. PREPARED BY
Signature: (signed)
Name in Print: EDUARDO N. OCHATE
Title or Position: Clerk
Date: Jan. 20, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: (signed)
Name in Print: CATALINA L. ESQUIJO
Title or Position: Municipal Civil Registrar
Date: Feb. 27, 1995

REMARKS/ANNOTATION

For OCRG USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

2110 [redacted]

LEGITIMATED BY VIRTUE OF SUBSEQUENT MARRIAGE OF PARENTS ON DECEMBER 25, 1994 AT SAINT BERNARD, SOUTHERN LEYTE. HENCEFORTH, THE CHILD SHALL BE KNOWN AS: GLENDA LORAINE SUMIPO SOBRIO

SID: D12BD1FF21379ED1F55E4C01A2384E1975A15DA

MS. EDITHA R. ORCILLA
08/04/2010 08:34 PM

03874-1B-004RSO-00125-BI044
BEST POSSIBLE IMAGE

BReN
06412-A93PT03-2

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

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KG000001262

Documentary Stamp Tax Paid

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

AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We, Lorenzo C. Sobrio Jr. and Gloria T. Sumipo 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.

LORENZO C. SOBRIO JR.
(Signature of Father)

Community Tax No.
Date Issued
Place Issued

GLORIA T. SUMIPO
(Signature of Mother)

Community Tax No.
Date Issued
Place Issued

SUBSCRIBED AND SWORN to before me this 27 day of Feb. 1995 at Saint Bernard, So. Leyte, Philippines.

(Signature of Administering Officer)
CATALINA L. ESQUIJO
(Name in Print)

Municipal Civil Registrar
(Title/Designation)
Saint Bernard, So. Leyte
(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, Gloria T. Sumipo, of legal age, single/married and with residence and postal address at Himbangan, St. Bernard, So. Leyte, 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 Glenda Loraine Sumipo
2. That I/he/she was born on July 27, 1993 at Himbangan, St. Bernard, So. Leyte
3. That I/he/she was attended at birth by Traditional Midwife who resides at Himbangan, St. Bernard, So. Leyte
4. That I/he/she is a citizen of Philippines
5. That my/his/her parents were ☐ married on N/A at
   ☐ not married but was acknowledge by my/his/her father whose name is Lorenzo C. Sobrio Jr.
6. That the reason for the delay in registering my/his/her birth was due to Negligence of the Traditional Midwife
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 N/A
   ☐ (For the father/mother/guardian) That I am the Mother of the said person.

GLORIA T. SUMIPO
(Signature of Affiant)

Community Tax No.
Date Issued
Place Issued

SUBSCRIBED AND SWORN to before me this 27 day of Feb. 1995 at Saint Bernard, So. Leyte, Philippines.

(Signature of Administering Officer)
CATALINA L. ESQUIJO
(Name in Print)

Municipal Civil Registrar
(Title/Designation)
Saint Bernard, So. Leyte
(Address)