



(Copy for OCRG)

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION
Republic of the Philippines <b>OFFICE OF THE CIVIL REGISTRAR GENERAL</b> <b>CERTIFICATE OF LIVE BIRTH</b> (Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)				
Province <u>LEYTE</u>		Registry No. <u>99-174</u>		
City/Municipality <u>ABUYOG</u>				
CHILD	1. NAME (First) <u>KATHLEEN MAE</u> (Middle) <u>BARONDA</u> (Last) <u>VALENCIA</u>		For OCRG USE ONLY: Population Reference No.	
	2. SEX <u>1</u> Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) <u>5</u> (month) <u>Nov.</u> (year) <u>1998</u>	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>Abuyog, Leyte</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
	5a. TYPE OF BIRTH <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify	
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>2nd</u>		d. WEIGHT AT BIRTH <u>3100</u> grams	
MOTHER	6. MAIDEN NAME (First) <u>JOYCE</u> (Middle) <u>BAUTISTA</u> (Last) <u>BARONDA</u>		41	
	7. CITIZENSHIP <u>FIL.</u>		48	
	8. RELIGION <u>R.Cath.</u>		49 50	
	9a. Total number of children born alive: <u>2</u>		b. No. of children still living including this birth: <u>2</u>	
	c. No. of children born alive but are now dead: <u>0</u>		56	
FATHER	10. OCCUPATION <u>Housekeeper</u>		61	
	11. Age at the time of this birth: <u>23</u> years		62 64	
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Abuyog, Leyte</u>		68 69	
	13. NAME (First) <u>ERNESTO</u> (Middle) <u>SILVANO</u> (Last) <u>VALENCIA</u>		70 72 74	
	14. CITIZENSHIP <u>FIL.</u>		75 79	
15. RELIGION <u>R.CATH.</u>		81		
16. OCCUPATION <u>Teacher</u>		86 87		
17. Age at the time of this birth: <u>28</u> years		88 91		
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>June 21, 1995-Abuyog, Leyte</u>				93 94
19a. ATTENDANT <u>X</u> 1 Physician <u>2</u> Nurse <u>3</u> Midwife <u>X</u> 4 Hilot (Traditional Midwife) <u>5</u> Others (Specify)				37010
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>12:00</u> o'clock am/pm on the date stated above.				06-21-98
Signature _____ Name in Print _____ Title or Position <u>Hilot</u>		Address _____ Date _____		01-26-99
20. INFORMANT Signature <u>Ernesto Valencia</u> Name in Print <u>ERNESTO S. VALENCIA</u> Relationship to the child <u>Father</u>		Address <u>Abuyog, Leyte</u> Date <u>January 12, 1999</u>		
21. PREPARED BY Signature <u>ASUNCION C. MARTINEZ</u> Name in Print <u>CLERK</u> Title or Position <u>January 12, 1999</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>ARIELA A. CUMPIO</u> Name in Print <u>NOR</u> Title or Position <u>January 26, 1999</u>		

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BEST POSSIBLE IMAGE



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Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General  
Philippine Statistics Authority





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

## AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We/I, \_\_\_\_\_ and \_\_\_\_\_  
 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 \_\_\_\_\_

(Signature of Mother) \_\_\_\_\_  
 Community Tax No. \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Place Issued \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_  
 at \_\_\_\_\_, Philippines.

(Signature of Administering Officer) \_\_\_\_\_ (Title/Designation) \_\_\_\_\_  
 (Name in Print) \_\_\_\_\_ (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, ERNESTO S. VALENCIA Abuog, Lerto, of legal age, single/married  
 and with residence and postal address at \_\_\_\_\_  
 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 KATHLEEN B. VALENCIA
2. That I/he/she was born on Nov. 3, 1998 at Abuog, Lerto
3. That I/he/she was attended at birth by \_\_\_\_\_ who resides at \_\_\_\_\_
4. That I/he/she is a citizen of the Phils.
5. That my/his/her parents were ☐ married on June 21, 1995 at Abuog, Lerto  
☐ 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 negligence
7. That a copy of my/his/her birth certificate is needed for the purpose of record
8. ☐ (For the applicant only) That I am married to \_\_\_\_\_  
☐ (For the father/mother/guardian) That I am the \_\_\_\_\_ of the said person.

ERNESTO S. VALENCIA

(Signature of Affiant) \_\_\_\_\_  
 Community Tax No. 17399021  
 Date Issued Abuog, Lerto  
 Place Issued \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this 26th day of January, 1999  
 at Abuog, Lerto, Philippines.

(Signature of Administering Officer) \_\_\_\_\_ (Title/Designation) MGR  
HENRISSA A. CUMPIO Abuog, Lerto  
 (Name in Print) \_\_\_\_\_ (Address) \_\_\_\_\_

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