Actional description of the Philippines  20hPrice for THE CIVIL REGISTRAR GENERAL CERTIFICATE OF LIVE BIRTH  Province of the Civil Registrary General Province of the Philippines answer in lines 2.6. to and 15a.)  Province of the Philippines answer in lines 2.6. to and 15a.)  Province of the Civil Registrary of the Philippines  Registrary 3 - 26.7  Registrary 3 - 2	Mu	nicipal Form No." 102	m.	o be accomplished in quadruplicate	REMARKS/ANNOTATION
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Sa. TYPE OF BIRTH  X 1 Single 3 1 Tiplet, etc.  C BIRTH ORDER (live blimbs and straid clastins including bits delivery) including bits delivery)  R. MAIDEN (First) (Middle) (Last)  NAME Pilchelle More Decio.  7. CITIZENSHIP  M 7. CITIZENSHIP  M 8. RELIGION  O 98. Total number of bits birthing including born slive but are now dead.  To coccupation  Buselcoeper (House No., Street, Barangay) (Chy/Municipality) (Province)  F 13. NAME Pilchelle Decio.  T 14. CITIZENSHIP  15. RELIGION  17. Age at the time of this birth:  18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accompilab Affidavit of Acknowledgment/Admission of Paterfilly at the back.)  Not use and add  1984, ATTENDANT  1984, ATTENDANT  1995, Interest of the birth of the child who was born slive at the brown of the straid above.  Signature Marries and Date  Address Stor. Robart U,  Name in Print.  Title or Position  2 Nurse  Signature  Address Stor. Robart U,  Name in Print.  Title or Position  Date  10. Information  Address Stor. Robart U,  Signature Machalle Date  Signature Machalle Date  Address Stor. Robart U,  Signature Machalle Date  Address Stor. Robart U,  Signature Machalle Date  Signature Machalle Date  Address Stor. Robart U,  Signature Machalle Date  Signature Store Robart U,  Signature Machalle Date  Address Stor. Robart U,  Signature Store Rob	Н			(Frosince)	REGISTRAR
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a Triglet, etc.  c. BIRTH ORDER (itve births and fetal deaths including this delivery)  19th (littat, second, third, etc.)  6. MAIDEN (First) (Middle) (Last)  NAME Mi chelle More B. RELIGION  7. CITIZENSHIP  8. RELIGION  8. RELIGION  98. Total number of children born silve but always are now dead:  10. OCCUPATION  11. Age at the time of this birth:  12. RESIDENCE (House No., Street, Barangay) (Chy/Municipally) (Province)  13. NAME (First) (Middle)  14. CITIZENSHIP  16. OCCUPATION  17. Age at the time of this birth:  18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Apknowledgment/Admission of Paternity at the back.)  1994, ATTENDANT  1996, CERTIFICATION OF BIRTH  1 hereby certify that Lattended the birth of the child who was born alive at the sime of the state of the	D				66-33:7
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Total Comparison   Total Compa	10/10 10/10			born alive but	
Hasekogper  12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  13. NAME (First) (Middle) (Cast) (Province)  14. CITIZENSHIP  16. OCCUPATION  17. Age at the time of this birth:  21. years  18. DATE AND PLACE OF MARRIAGE OF PARENTS (# not married, accompileh Affidavit of Acknowledgment/Admission of Paternity at the back.)  19a, ATTENDANT  1 Physician  1 Physician  1 Physician  1 Physician  1 Physician  2 Nurse  3 Midwite  1 Physician  3 Midwite  1 Physician  1 Physician  2 Nurse  3 Midwite  1 Physician  3 Midwite  1 Physician  4 Hilot (Traditional Midwife)  5 Others (Specify)  1 Sb. CERTIFICATION OF BIRTH  1 Interior certify that I strended the birth of the child who was born alive at 3 to 0 o'clock am/pm on the date stated above.  3 Signature  Name in Print Title or Position  Name in Print I CH String DECTO  Relationship to the child lother  Address  4 Hilot (Province)  1 Province)  1 Province  1 Province)  1 Province  1 Pr			Uns piret:		61
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Hillot (Traditional Midwife)  19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at 5:00 o'clock am/pm on the date stated above.  Signature Name in Print. Title or Position  20. INFORMANT  Signature Muchule Socio Name in PrintICITETIETIE DECTO Relationship to the child Ic theory  Address  4ddress  86 57  1830  Address  91  Wintug-ob, Leyte Date  Livy 9, 2000		19a, ATTENDANT	97.3		
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Relationship to the child 10 there Date 13y 8, 2000		Name in Print I CHELLS DEC	10	Matag-ob, Layte	
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21. PREPARED BY  22. RECEIVED AT THE OFFICE OF  THE CIVIL REGISTRAR		21. PREPARED BY			
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Name in Printers Position And Annual Printers of Agustin D. 2 Sprano, JR.			Signature		1 TARIM

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CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

	For births before 3 August 1988/on or after 3 August 1988					
1	ROBURNS Delote & August 1900/011 of aller & August 1900					
	AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY					
80%	Well Rome Ompod and					
	We/I, Rome Umpod and					
	Romugani shandad					
	(Signature of Father) (Signature of Mother)					
	Community Tax No Community Tax No					
	Date Issued					
	SUBSCRIBED AND SWORN to before me this 8th day of 11ay , 2000 at, Philippines.					
	Local Civil Registrar					
	Signature of Administering Officer) (Title/Designation)					
	MOR AGUSTIN D. PADRANO, JR. Hatag-ob. Leyte					
	(Name in Print) (Address)					
	Not applicable for births before 27 February 1931					
	AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH					
1	(Either the person himself if 18 years old or over, or father/mother/guardian may accomplish this affidavit.)					
7	L Michelle D. Ompod , 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 continue for the deleved registration of my high/of the high of					
	1. That I am the applicant for the delayed registration of my birth/of the birth of GERALD 9. ONPOD					
	2 That I/he/she was born on March 9, 1997 at Tru-cut Sto. Rosario. Matag-ob.					
	3. That I/he/she was attended at birth by 110t hertersides at					
	4 That I/he/she is a citizen of the Philippines					
	5. That my/his/her parents were married on April 26, 2000t datagoob, Mun.					
	not married but was acknowledge by my/his/her father whose					
	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					
	8. (For the applicant only) That I am married to					
	(For the father/mother/guardian) That I am the <u>idother</u> of the said person.					
	michelle alicio					
	(Signatified Affiant)					
	Community Tax No. 03485220  Date Issued April 28, 2000					
	Place IssuedMatagoob, Leyte					
	SUBSCRIBED AND SWORN to before me this 8th day of Koy , 2009  at Leyte , Philippines.					
	Local Civil Registrar					
	(Signature of Administering Officer) (Title/Designation)					
	Matarob Leyte (Name in Print) (Address)					
	(Fautoer					

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CLAIRE DENNIS S. MAPA, Ph. D.

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Philippine Statistics Authority