



REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly in ink or typewriter)

Leyte

PROVINCE _____
 CITY / MUNICIPALITY Baybay LOCAL CIVIL REGISTRY NO. 85-181

1. NAME PAATRICK JOHN BERNARDINO PIRAMONTE

2. SEX (Place 'X' on appropriate answer)
☒ 1. Male ☐ 2. Female DATE OF BIRTH (Day) (Month) (Year)
18th January 1985

4. PLACE OF BIRTH (Name of hospital/institution, if not in hospital, give street / barangay) (City / Municipality) (Province)
Western Leyte Provincial Hospital Baybay Leyte

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 5b. IF MULTIPLE BIRTH, CHILD WAS
☒ 1. Single ☐ 2. Twin ☐ 3. Three or more ☒ 1. First ☐ 2. Second ☐ 3. Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last) 7. NATIONALITY 8. RELIGION
Marissa Belliones Belardino Fil Rc

9. NAME (First) (Middle) (Last) 10. NATIONALITY 11. RELIGION
Edito Gloria Piamonte Fil Rc

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important! If not applicable, fill Affidavit of Acknowledgement of the birth)
December 29, 1984 Baybay, Leyte

13. CERTIFICATE OF ATTENDANT AT 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 [Signature] WLPB
 Name in print VICENTE F. GERMANO, M.D. Address Baybay, Leyte
 Title or position Resident Physician Date January 20, 1985

14. INFORMANT
 Signature [Signature] Address Pangasinan
 Name in print EDITO PIAMONTE Baybay, Leyte
 Relationship to child Father Date January 20, 1985

15a. PREPARED BY
 Signature [Signature]
 Name in print Nursing Attendant
 Title or position January 20, 1985 3390
 Date _____

15b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
 Signature [Signature]
 Name in print PERFUMIO V. BULLA
 Title or position January 22, 1985
 Date _____

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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