Municipal Form No. 97
(Revised January 2007)

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

(To be accomplished in quadruplicate using black ink)

CERTIFICATE OF MARRIAGE

Registry No. 2015-391

Province: LEYTE
City/Municipality: CITY OF BAYBAY

	HUSBAND	WIFE
1. Name of Contracting Parties	ARIAN WEN RESANO GERALDO	MONA NENA CALA BESTUDIO
2a. Date of Birth / 2b. Age	18 OCTOBER 1984 31	04 NOVEMBER 1986 28
3. Place of Birth	BAYBAY, LEYTE, PHILIPPINES	BAYBAY, LEYTE, PHILIPPINES
4a. Sex / 4b. Citizenship	MALE FILIPINO	FEMALE FILIPINO
5. Residence	BRGY. CARIDAD, CITY OF BAYBAY, LEYTE, PHILIPPINES	BRGY. CARIDAD, CITY OF BAYBAY, LEYTE, PHILIPPINES
6. Religion/ Religious Sect	ROMAN CATHOLIC	ROMAN CATHOLIC
7. Civil Status	SINGLE	SINGLE
8. Name of Father	ROLANDO ACEDILLA GERALDO	MARFELITO AUTIDA BESTUDIO
9. Citizenship	FILIPINO	FILIPINO
10. Maiden Name of Mother	ADELINA LAGARDE RESANO	NENA CABALLES CALA
11. Citizenship	FILIPINO	FILIPINO
12. Name of Person/ Wal Who Gave Consent or Advice	NOT APPLICABLE	NOT APPLICABLE
13. Relationship		
14. Residence		

15. Place of Marriage: OFFICE OF THE CITY MAYOR (Office of the/House of/Barangay of/Church of/Mosque of) CITY OF BAYBAY (City/Municipality) LEYTE (Province)

16. Date of Marriage: 05 NOVEMBER 2015 17. Time of Marriage: 10:00 AM am/pm

18. CERTIFICATION OF THE CONTRACTING PARTIES:
THIS IS TO CERTIFY: That I, ARIAN WEN RESANO GERALDO and I, MONA NENA CALA BESTUDIO, 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 entered, a copy of which is hereto attached / X have not entered into a marriage settlement.
IN WITNESS WHEREOF, we have signed /marked with our fingerprint this certificate in quadruplicate this 5th day of NOVEMBER 2015

(Signature of Husband) (Signature of Wife)

19. CERTIFICATION OF THE SOLEMNIZING OFFICER:
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:
a. Marriage License No. issued on at
In favor of said parties, was exhibited to me.
X b. no marriage license was necessary, the marriage being solemnized under Art. 34 of Executive Order No. 209.
c. the marriage was solemnized in accordance with the provisions of Presidential Decree No. 1083.

HON. CARMEN L. CARI — CITY MAYOR
(Signature Over Printed Name of Solemnizing Officer) (Position/Designation) (Religion/Religious Sect, Registry No. and Expiration Date, if applicable)

20a. WITNESSES (Print Name and Sign):
Additional at the back

FEDERICO MILAN VIRGINIA A. CASTRO FILEMON AVILA LUZ MELENDRES

21. RECEIVED BY
Signature
Name in Print TERESITA M. CARTON
Title or Position ASST. CIVIL REG. OFFICER
Date NOV 06 2015

22. REGISTERED BY THE CIVIL REGISTRAR
Signature
Name in Print NOEL V. MANACBANAG
Title or Position CITY CIVIL REGISTRAR
Date NOV 06 2015

REMARKS/ANNOTATIONS (For LCRO/OCRG/Shari'a Circuit Registrar Use Only)

TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR

4bH	4bW	5H	5W	6H	6W	7H	7W
0 1 0 1	6 0 8 0	3 7 0 8	6 0 8 0	3 7 0 8	0 8	0 8	1 1

07556-49-991SCB-01439-MI002

BEST POSSIBLE IMAGE

T0800755699101439090820200002

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Documentary Stamp Tax Paid

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

PHILIPPINE STATISTICS AUTHORITY

Municipal Form No. 102
(Revised 1983)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out, completely, accurately and legibly in ink or typewriter)

LOCAL CIVIL REGISTRY NO. 86-2555

PROVINCE Leyte
CITY/MUNICIPALITY Baybay

1. NAME (First) MONA NENA (Middle) CALA (Last) BESTUDIO
2. SEX (Place 'X' on appropriate answer) ___ 1 Male X 2 Female
3. DATE OF BIRTH (Day) 4th (Month) November (Year) 1986
4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) Western Leyte Provincial Hospital (City/Municipality) Baybay (Province) Leyte
5a. TYPE OF BIRTH (Place 'X' on appropriate answer) X 1 Single ___ 2 Twin ___ 3 Three or more
b. IF MULTIPLE BIRTH, CHILD WAS ___ 1 First ___ 2 Second ___ 3 Third, 4th, etc.

Mother 6. MAIDEN NAME (First) (Middle) (Last)	Nena Caballes Cala	7. NATIONALITY	Fil	8. RELIGION	Rc
Father 9. NAME (First) (Middle) (Last)	Marielito A. Bestudio	10. NATIONALITY	Fil	11. RELIGION	Rc

12. DATE AND PLACE OF MARRIAGE OF PARENTS (If not applicable, fill Affidavit of Acknowledgment at the back) April 15, 1983 Baybay, Leyte

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 3:55AM *o'clock a.m./p.m. on the date stated above.*
Signature R Fulvadoha Address WLPH Baybay, Leyte
Name in print REGINA FULVADOHA, M.D. Date 11/4/86
Title or position Resident Physician

14. INFORMANT
Signature M. Bestudio Address M.L. Quezon st. Baybay, Leyte
Name in print MARFELITO A. BESTUDIO Date 11/4/86
Relationship to child Father

15a. PREPARED BY
Signature Epifania B. Milan Name in print EPIFANIA B. MILAN
Title or position Reg. Midwife Date 11/4/86

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRA
Signature Name in print PETRONILO V. SULLA
Title or position L.C.R. Date 11/7/86

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT
b. DATE WHEN INFORMATION WAS SUPPLIED 0346

(Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar)

Local Civil Registry No. 8 6 0 2 5 5 5 (8) Registration Status 1 (15)

PROVINCE Leyte
CITY/MUNICIPALITY Baybay

Child
17. Weight at Birth (In grams) 3,300gms (16)
18. Birth Order of Child Ex. first, second, etc. 1 (20)
19a. Total Number of Children Born Alive 01 (22)
b. How many children are now living including this birth? 01 (24)
c. How many children were born alive but are now dead? 00

Mother
20. Usual Occupation Housewife (28)
21. Age at the time of this Birth 19
22. Usual Residence (Barangay) M.L. Quezon st., (City/Municipality) Baybay (Province) Leyte (33)

Father
23. Usual Occupation 910 (38)
24. Age at the time of this Birth 19

25. Attendant at Birth (Place 'X' on appropriate answer) X 1 Physician ___ 2 Nurse ___ 3 Midwife ___ 4 Hilot ___ 5 Others

RESERVE FOR BINDING

Sex 2 (44) Date of Birth 04 11 86 (45) Place of Birth 0 3 0 4 (51) Mother's Nationality 1 (56) Father's Nationality 1 (57)

NAME OF CHILD
First: MONA NENA (58) M.I.: C (70) Last: BESTUDIO (71)

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National Statistician and Civil Registrar General
Philippine Statistics Authority

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