

## REPUBLIC OF THE PHILIPPINES CERTIFICATE OF LIVE BIRTH

(To be accomplished in Triplicate)

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

LATE REGISTRATION

PROVINCE	Leyte	LOCAL CIV	IL REGIS	TRY NO.	1- 201		
CITY / MUNICIPALITY	Baybay	The second secon		00.32.	Brok No. 14		
1. NAME	(First)	(Middle)	77.5	(Last)	100		
· .	TEOFILO	CAÑETE		GOFREDO			
2. SEX (Place 'X' on	appropriate answer)	DATE OF BIRTH	(Day)	(Month)	(Year)		
X1 Male			12	JANUARY	1968		
<ol> <li>PLACE OF (Name of BIRTH give str</li> </ol>	of hospital/institution; if not in hospital, eet/barangay)	(City/Municipa	elity)	(P	rovince)		
Bgy. Hibunawan		Baybay,		Leyte			
5a. TYPE OF BIRTH (P	ace 'X' an appropriate answer)	5b. IF MULTIPLE BIR	TH, CHIL				
X1 Single	2 Twin 3 Three or more	1 First2 \$	ecend	3 Third, 4	th etc		
6. MAIDEN (Firs	t) (Middle) (Last)	7. NATIONALITY		8. RELIGION			
	Calixtra E. Cañete		Filipino 10. NATIONALITY		Rom. Cath.		
9. NAME (First					11. RELIGION		
Se	Saturnino C. Gofredo						
	-011000		Filipino Fom. Cath.				
	·	portant: if not applicable	e, fill Affic	lavit of Acknowle	dgment at the back		
Date	April 12, 19 <b>5</b> 2 ATTENDANT AT BIRTH	Place Bayba	y, Leyt	,e			
I hereby certify	that I attended the birth of the child who	was born alive at 1:0010	Man Inm	n the date stated	ah oya		
Signature	iol olicoli			an, Baybay,			
Name in print	REGINO CALZADA	Address		, , ,			
Title or position	hilot	Date	1-12-6	.8			
14. INFORMANT	SDIFULL ST	Date					
Cimil (	Exeliation C Hapodo						
	CALIXTRA C. GOFREDO	AddressBgy •	Hibuna	wan, Baybay,	, Leyte		
		-	- 14				
The same of the sa	id mother	Date	19428-9	1			
15a.PREPARED BY	) Cita	RECEIVED AT	of Ce Al	THE LOCAL	CIVIL REGISTRAF		
Signature	1100	Signature	. 0				
Name in print	Clerk III	Name in print		MAMAGEANAG	i i		
Title or position Date	4-8-91	Title or position		C.R. 9-91			
6a.INFORMATIONGIN	EN IN SUPPLEMENTAL REPORT	b. DATE WHEN IN	10 ME : .				
		S. BATE WILLIAM	IFORWIAT	TON WAS SUPPL	.IES		
·	(Important: Informant should also provid	le information for items 1 Office of the Local Civil F	7 to 25. T	he code boxes are	e to be filled		
	cut at the	Office of the Local Civil F			Registration		
,			Local Ci	vil Registry	Status		
	PROVINCE Leyte						
	CITY / MUNICIPALITY Baybay		•		15		
N G Child	17. Weight of Birth (In grams) 3119		irth Order		016		
N D		6 E	x. first, se	cond, etc. 6	th 06		
	19a. Total Number of b.	How many children are		c. How man	y children		
Z - 8	Children Born Alive 6 22	now living including	0	were bori	n alive but 0/2		
other	20. Usual Occupation	this birth?	24		dead? 2 28		
M A	housekeeper	14 401	ge at the to		43		
0 4	22. Usual Residence Barangay	(City/Municipality)			yrs. 31		
	Bgy. Hibunawan		)	(Province)	37 98 5		
E E	23. Usual Occupation		ge at the t	Leyte	33		
>	Farmer	39	f this Birth		yrs. 41		
ω «	25. Attendant of Birth (Place 'X' on app						
E S I	1 Physician2 Nurse	3 Midwife X	4 Hilot	5 Others	43		
æ	Sex Date of Birth	all they will be a low	Mot	her's Fath	er's		
	1 12 01 68	Place of Birth	Natio	nality Nation	ality		
	44 45	3 7 0 8 5		1			
		NAME OF CHILD	5	6 57			
	First	M.I.		Last			
	TI THE ICH THE TELEVILLE	1 1   0   1 - 1 - 1	1 1		1 1		