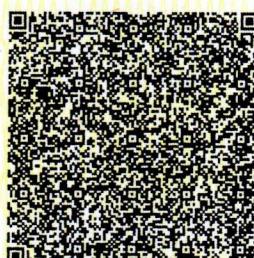




Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)	
<b>Republic of the Philippines</b> <b>OFFICE OF THE CIVIL REGISTRAR GENERAL</b> <b>CERTIFICATE OF LIVE BIRTH</b> <small>2004-497 2004-498 (Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)</small>			
Province <u>Surigao del Norte</u> City/Municipality <u>Surigao City</u>		Registry No. <u>2004-1832</u>	
1. NAME (First) <u>REYNOLD</u> (Middle) _____ (Last) <u>BORJA</u>		REMARKS/ANNOTATION	
2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		DATE OF BIRTH (day) (month) (year) <u>25 April 1997</u>	
3. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>Purok 3, Bgy. San Juan, Surigao City</u>		4. REMARKS/ANNOTATION <b>LATE REGISTRATION:</b> Legitimated by subsequent marriage by Parents Reynaldo C. Borja and Risa M. Borja on February 14, 1998 at City Auditorium Surigao City.	
5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		5b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify _____	
5c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>1st</u> (first, second, third, etc.)		5d. WEIGHT AT BIRTH <u>2722</u> grams	
6. MAIDEN NAME (First) <u>RIMA</u> (Middle) <u>M.</u> (Last) <u>BORJA</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Catholic</u>	
9a. Total number of children born alive: <u>2</u>		9b. No. of children still living including this birth: <u>2</u>	
9c. No. of children born alive but are now dead: <u>0</u>			
10. OCCUPATION <u>Householder</u>		11. Age at the time of this birth: <u>21</u> years	
12. RESIDENCE (House No., Street, Barangay) <u>Purok 3, Bgy. San Juan, Surigao City</u> (City/Municipality) <u>Surigao del Norte</u> (Province)		13. NAME (First) <u>REYNOLD</u> (Middle) <u>G.</u> (Last) <u>BORJA</u>	
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Catholic</u>	
16. OCCUPATION <u>Driver</u>		17. Age at the time of this birth: <u>21</u> years	
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)  GE.			
19a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" type="checkbox"/> 4 Pilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify) _____			
19b. CERTIFICATION OF 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 _____ Address _____ Name in Print <u>REYNOLD C. BORJA</u> Date <u>May 28, 2004</u> Title or Position <u>Trained Driver</u>			
20. INFORMANT  Signature <u>P. Borja</u> Address <u>P-9, Bgy. San Juan, Surigao City</u> Name in Print <u>RIMA M. BORJA</u> Date <u>May 28, 2004</u> Relationship to the child <u>Mother</u>			
21. PREPARED BY  Signature <u>Mapa</u> Name in Print <u>CLAIRE DENNIS S. MAPA</u> Title or Position <u>NATIONAL STATISTICIAN AND CIVIL REGISTRAR GENERAL</u> Date <u>MAY 20, 2004</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR  Signature <u>Mapa</u> Name in Print <u>CLAIRE DENNIS S. MAPA</u> Title or Position <u>NATIONAL STATISTICIAN AND CIVIL REGISTRAR GENERAL</u> Date <u>MAY 20, 2004</u>	



08906-8C-728DM1-00025-BI001

BEST POSSIBLE IMAGE



T00208906728002505202024001

QR500366974

*CDSM*  
 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

## AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We/I, Reynaldo C. Begil, 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.

REYNALDO C. BEGIL

(Signature of Father)

Community Tax No. 10301892  
 Date Issued May 25, 2004  
 Place Issued Brgy. San Juan, Surigao City

(Signature of Mother)

Community Tax No. \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Place Issued \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this 28th day of May, 2004  
 at Surigao City, Philippines.

Manuel A. Edera

(Name in Print)

City Civil Registrar

(Title/Designation)

Surigao City

(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, Rina B. Begil, of legal age, single/married and with residence and postal address at P-9, Brgy. San Juan, Surigao City, 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 Reynaldo B. Begil
2. That I/he/she was born on April 25, 1997 at Purok 9, Brgy. San Juan, Surigao City
3. That I/he/she was attended at birth by a trained midwife who resides at Site 10, Bgy. Sabang, Surigao City
4. That I/he/she is a citizen of the Philippines
5. That my/his/her parents were  married on \_\_\_\_\_ at \_\_\_\_\_  
 not married but was acknowledged by my/his/her father whose name is \_\_\_\_\_
6. That the reason for the delay in registering my/his/her birth was due to inadherence of the parents
7. That a copy of my/his/her birth certificate is needed for the purpose of registration.
8.  (For the applicant only) That I am married to \_\_\_\_\_  
 (For the father/mother/guardian) That I am the Mother of the said person.

Rina B. Begil

(Signature of Affiant)

Community Tax No. 10301892  
 Date Issued May 25, 2004  
 Place Issued Brgy. San Juan

SUBSCRIBED AND SWORN to before me this 28th day of May, 2004  
 at Surigao City, Philippines.

Manuel A. Edera

(Name in Print)

City Civil Registrar

(Title/Designation)

Surigao City

(Address)

08906-8C-728DM1-00025-BI001

BEST POSSIBLE IMAGE



T002089067280002505202024001

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

Republic of the Philippines  
PHILIPPINE STATISTICS AUTHORITY

OFFICIAL RECEIPT

OR No. 240520-728-01-ESM-00029

BEGIL,  
REYNOLD B.

	AMOUNT
Tran No. 08906-728-00025-001	
<b>REYNOLD B BEGIL 04/25/1997</b>	
COPY ISSUANCE - BIRTH CERTIFICATE	
Unit Cost : 155.00	Qty : 1 155.00
TOTAL	155.00
AMOUNT TENDERED	155.00
CHANGE	0.00

CASH

INCLUDES DOCUMENTARY STAMP TAX  
OF PHP 30.00/COPY

Collecting Officer: Rhea Mae C. Silica

Terminal Code: 01

Date-Time: 05/20/2024 08:13:06 AM