

Municipal Form No. 102
(Revised January 2007)Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

CERTIFICATE OF LIVE BIRTH

Province	Metro Manila			Registry No.	2017 - 713
City/Municipality					
1. NAME	(First) ELIAS LAKAN	(Middle) REYES	(Last) DULAY		
2. SEX (Male / Female)	Male	3. DATE OF BIRTH	(Day) 27	(Month) January	(Year) 2017
4. PLACE OF BIRTH	(Name of Hospital/Clinic/Institution/ House No., St., Barangay) Adventist Medical Center Manila, Pasay City, Metro Manila,			(City/Municipality)	(Province) Philippines
5a. TYPE OF BIRTH	(Single, Twin, Triplet, etc.) Single		5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.)	5c. BIRTH ORDER (Order of this birth to previous live births including total deaths) (First, Second, Third, etc.) First	6. WEIGHT AT BIRTH 3232 grams
7. MAIDEN NAME	(First) MAE FAITH	(Middle) BORRES	(Last) REYES		
8. CITIZENSHIP	Filipino			9. RELIGION/RELIGIOUS SECT	Catholic
10a. Total number of children born alive	1	10b. No. of children still living including this birth	1	10c. No. of children born alive but are now dead	0
11. OCCUPATION	Accounts Payable Specialist			12. AGE at the time of the birth (completed years)	25
13. RESIDENCE	(House No., St., Barangay) 2200 P. Dandan St., Brgy. 54, Pasay City, Metro Manila, Philippines			(City/Municipality)	(Province) (Country)
14. NAME	(First) JOHN PATRICK	(Middle) ESCOSA	(Last) DULAY		
15. CITIZENSHIP	Filipino			16. RELIGION/RELIGIOUS SECT	Catholic
17. OCCUPATION	Self Employed			18. AGE at the time of this birth (completed years)	27
19. RESIDENCE	(House No., St., Barangay) 2200 P. Dandan St., Brgy. 54, Pasay City, Metro Manila, Philippines			(City/Municipality)	(Province) (Country)
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)					
20a. DATE	(Month) October	(Day) 08	(Year) 2016	20b. PLACE	(City / Municipality) (Province) (Country) Pasay City, Metro Manila, Philippines
21a. ATTENDANT					
<input checked="" type="checkbox"/> 1. Physician <input type="checkbox"/> 2. Nurse <input type="checkbox"/> 3. Midwife <input type="checkbox"/> 4. Hilot (Traditional Birth Attendant) <input type="checkbox"/> 5. Others (Specify)					
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, Hilot, etc.)					
I hereby certify that I attended the birth of the child who was born alive at 11:07 PM am/pm on the date of birth specified above. Signature <u>John Patrick E. Dulay</u> Address Adventist Medical Center Manila Name in Print IRMA RAJAGUKGU MAGNAYE, MD, DOBS 1975 Donada St., Pasay City Title or Position Physician Date 29 January 2017					
22. CERTIFICATION OF INFORMANT					
I hereby certify that all information supplied are true and correct to my own knowledge and belief. Signature <u>John Patrick E. Dulay</u> Name in Print Father Relationship to the Child 2200 P. Dandan St., Brgy. 54, Pasay City Address Metro Manila, Philippines Date 29 January 2017					
23. PREPARED BY					
Signature <u>Beryl R. Malayo</u> Name in Print BERYL R. MALAYO Title or Position Dept. Head, Medical Records Date 29 January 2017					
24. RECEIVED BY					
Signature <u>Romulo C. Thesvaller</u> Name in Print ROMULO C. THESVALLER Title or Position REGISTRATION OFFICER III Date FEB 02 2017					
25. REGISTERED BY THE CIVIL REGISTRAR					
Signature <u>Romulo C. Thesvaller</u> Name in Print ROMULO C. THESVALLER Title or Position REGISTRATION OFFICER III Date FEB 02 2017					
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)					
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR 8 9 11 13 15 16 17 19 010824160807405010809365867605					

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BEST POSSIBLE IMAGE



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CLAIREDENNIS S. MAPA, Ph. D.

National Statistician and Civil Registrar General
Philippine Statistics Authority

