

(Copy for OCRG)


 Municipal Form No. 102
 (Revised January 1993)

(To be accomplished in quadruplicate)

 Reg. No. 129
 Series of 1999.

 Republic of the Philippines
 OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

 (Fill out completely, accurately and legibly. Use ink or typewriter.
 Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)

Province <u>Metro Manila</u>		Registry No. <u>09-3100</u>	
City/Municipality <u>San Juan</u>		FATHER <u>HENRY P. HERNANDEZ</u>	
1. NAME (First) <u>JON RHEM AX'L</u> (Middle) (Last) <u>BENIG</u>		REMARKS/ANNOTATION LEGITIMATED by subsequent Marriage of parents on July 10, 1999 at Sariaya, Quezon. Hence, the child shall be known as JON RHEM AX'L B. HERNANDEZ.	
2. SEX <u>X</u> 1 Male 2 Female		For OCRG USE ONLY: Population Reference No. <u>9903106</u>	
3. DATE OF BIRTH <u>18</u> (day) <u>February</u> (month) <u>1999</u> (year)		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>St. Martin De Porres Charity Hospital San Juan, M.M.</u>		41 <u>9903106</u>	
5a. TYPE OF BIRTH <u>X</u> 1 Single 2 Twin 3 Triplet, etc.		48 <input checked="" type="checkbox"/>	
b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify		49 <u>1</u> 50 <u>180299</u>	
c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>1st.</u> (first, second, third, etc.)		56 <u>74054</u>	
d. WEIGHT AT BIRTH <u>5.8</u> lbs. grams		61 <u>1</u>	
6. MAIDEN NAME (First) <u>LIZEL</u> (Middle) <u>DIME</u> (Last) <u>BENIG</u>		62 <u>01</u> 64 <u>2631</u>	
7. CITIZENSHIP <u>Filipino</u>		68 <u>1</u> 69 <u>4</u>	
8. REGION <u>C.</u>		70 <u>01</u> 72 <u>01</u> 74 <u>00</u>	
9a. Total number of children born alive: <u>1</u>		76 <u>226</u> 78 <u>23</u>	
b. No. of children still living including this birth: <u>1</u>		81 <u>74013</u>	
c. No. of children born alive but are now dead: <u>0</u>		86 <u>1</u> 87 <u>4</u> 0890	
10. OCCUPATION <u>Housewife</u>		88 <u>290</u> 91 <u>23</u>	
11. Age at the time of this birth: <u>23</u> years		93 <u>2</u> <u>1111</u> <u>1111</u> <u>07/1999</u>	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Blk. 19-B Martinez St., Mandaluyong City</u>		94 <u>1</u> <u>0902</u>	
13. NAME (First) <u>HENRY</u> (Middle) <u>PEREZ</u> (Last) <u>HERNANDEZ</u>			
14. CITIZENSHIP <u>Filipino</u>			
15. RELIGION <u>I.N.C.</u>			
16. OCCUPATION <u>R/A</u>			
17. Age at the time of this birth: <u>23</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>NOT MARRIED</u>			
19a. ATTENDANT 1 Physician <u>X</u> 2 Nurse <u>X</u> 3 Midwife <u>X</u> 4 Hilot (Traditional Midwife) <u>X</u> 5 Others (Specify) <u>X</u>			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>1:13</u> o'clock <u>am/pm</u> on the date stated above. Signature <u>CARMELITA N. ERICIA</u> Address <u>Blk. 70-A Bonifacio St., San Juan, M.M.</u> Name in Print <u>CARMELITA N. ERICIA</u> Date <u>February 18, 1999</u> Title or Position <u>PHYSICIAN</u>			
20. INFORMANT Signature <u>LIZEL BENIG</u> Address <u>Blk. 19-B Martinez St., Mandaluyong City</u> Name in Print <u>LIZEL BENIG</u> Date <u>July 19, 1999</u> Relationship to the child <u>MOTHER</u>			
21. PREPARED BY Signature <u>Carmelita N. Ericia</u> Name in Print <u>Carmelita N. Ericia</u> Title or Position <u>Clerk</u> Date <u>July 19, 1999</u>			
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>ANTONIO S. DILLA</u> Name in Print <u>ANTONIO S. DILLA</u> Title or Position <u>Civil Registrar</u> Date <u>19 JUL 1999</u>			

02622-AF-132AAP-00249-BI003

BEST POSSIBLE IMAGE



T132026221320024903072007003

 BReN
 07405-A99CJ02-3

Carmelita N. Ericia
 CARMELITA N. ERICIA
 Administrator and Civil Registrar General
 National Statistics Office



For births before 3 August 1988/on or after 3 August 1988

AFFIDAVIT OF ACKNOWLEDGMENT/ADMISSION OF PATERNITY

We/I, Henry P. Hernandez and Lizel Benig
 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.

[Signature]
 (Signature of Father)

(Signature of Mother)

Community Tax No. 17343059

Community Tax No. _____

Date Issued 7-19-99

Date Issued _____

Place Issued San Juan, P.R.Place Issued JUL 19 1999

SUBSCRIBED AND SWORN to before me this _____ day of _____
 at _____ Philippines.

(Signature of Administering Officer)

ROMUALDO G. DE LOS SANTOS

(Title/Designation)

(Name in Print)

(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, Lizel Benig, of legal age, single/married
 and with residence and postal address at 135-A Rita St., San Juan, P.R.
 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 _____
2. That I/he/she was born on 2-12-99 at SWICH
3. That I/he/she was attended at birth by _____ who resides at _____
4. That I/he/she is a citizen of _____
5. That my/his/her parents were ☐ married on _____ at _____
☒ not married but was acknowledge by my/his/her father whose
 name is Henry P. Hernandez
6. That the reason for the delay in registering my/his/her birth was due to Late submission of data
7. That a copy of my/his/her birth certificate is needed for the purpose of record purpose
8. ☐ (For the applicant only) That I am married to _____
☐ (For the father/mother/guardian) That I am the mother of the said person.

(Signature of Affiant)

Community Tax No. 17343038Date Issued 7-19-99Place Issued San Juan, M.M.

SUBSCRIBED AND SWORN to before me this _____ day of JUL 19 1999
 at _____ Philippines.

(Signature of Administering Officer)

ROMUALDO G. DE LOS SANTOS

(Title/Designation)

(Name in Print)

(Address)

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Carmelita N. ERICTA
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 Administrator and Civil Registrar General
 National Statistics Office