



Republic of the Philippines  
OFFICE OF THE CITY CIVIL REGISTRAR  
City of San Pablo

TO WHOM IT MAY CONCERN:

WE CERTIFY THAT, among others, the following facts of birth appear in our Register of Births  
on Page \_\_\_\_\_ of Book Number \_\_\_\_\_

**HUSBAND**

**WIFE**

**Name**

**Age**

**Nationality**

**Civil Status**

**Mother**

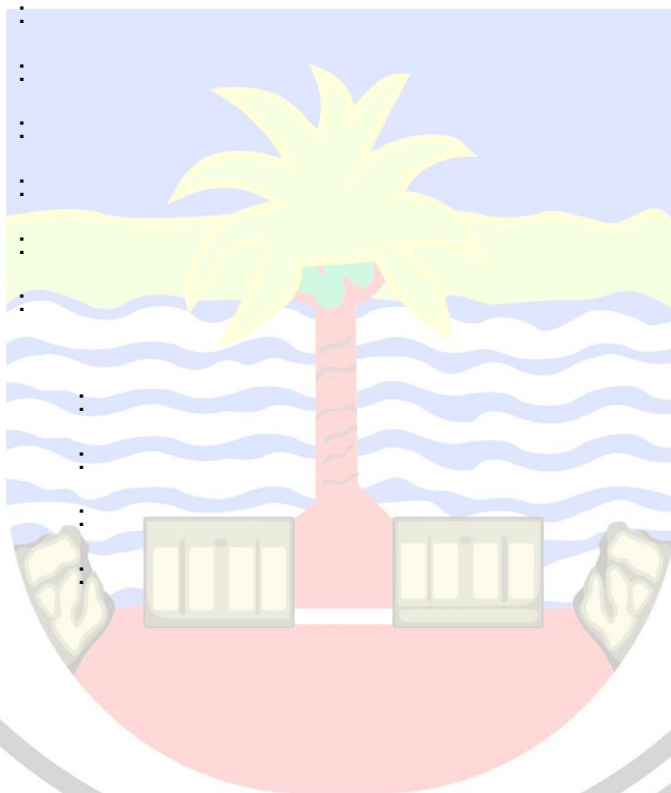
**Father**

**LCR Registry Number**

**Date of Registration**

**Date of Marriage**

**Place of Marriage**



Doc. Stamps  
Affixed on  
Original

**City Civil Registrar**

PROCESSED AND VERIFIED BY:

FOR THE CITY CIVIL REGISTRAR

Amount Paid :

O.R. Number :

Date Paid :