

This is to certify that this is a true copy
of the original which I have sighted.
Date 4/1/2016
Signed B.Wentworth
Title J.P. (QAL)



*This is to certify that this is a true copy
of the original which I have sighted.*

Date 4/15/2016
signed B. Wentworth
Title JP (EQUAL)



*This is to certify that this is a true copy
of the original which I have sighted.*

Date 4/ May / 2016

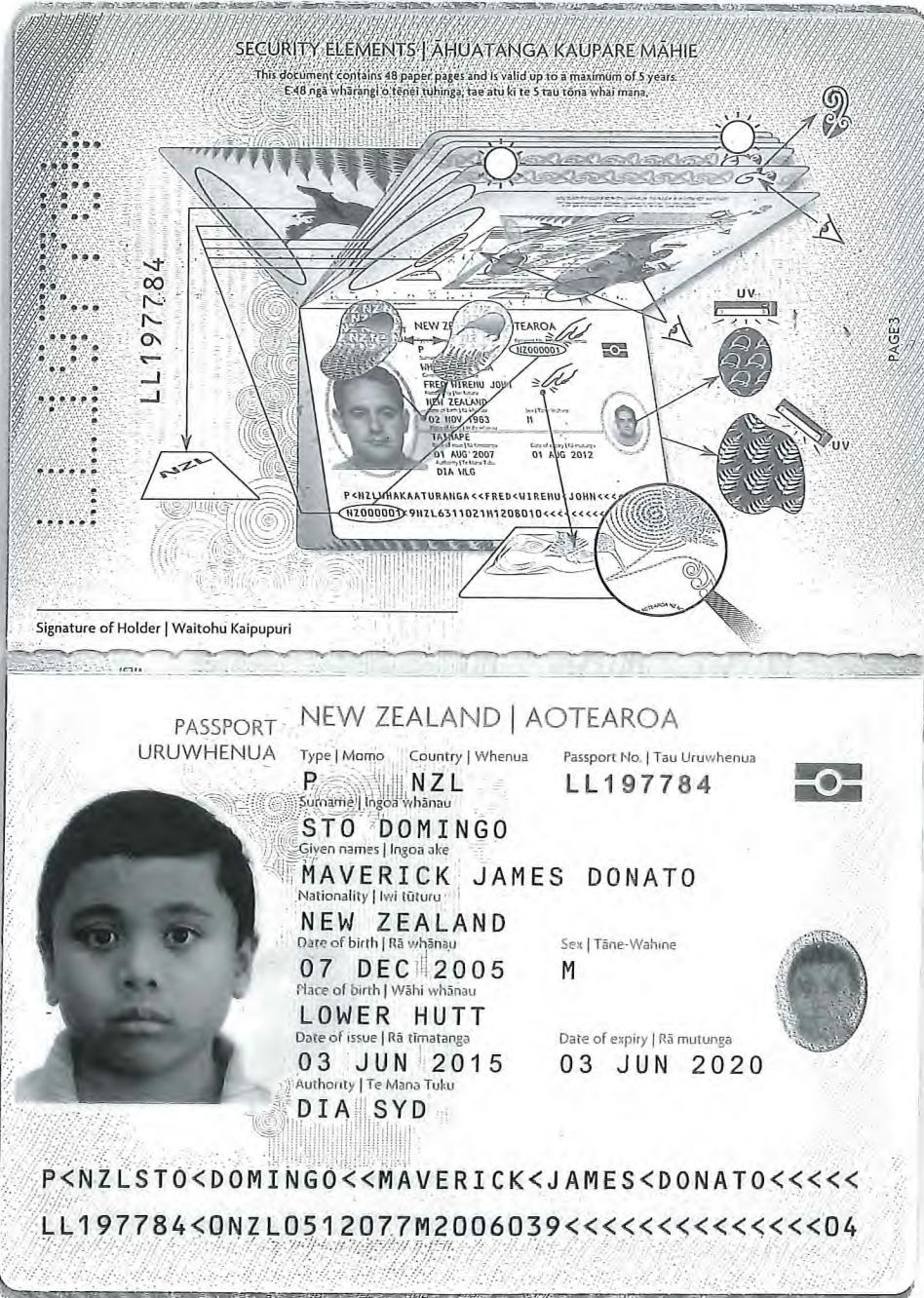
Signed BWentworth

Title JP (QUAC)



SECURITY ELEMENTS | ĀHŪATANGA KAUPARE MĀHIE

This document contains 48 paper pages and is valid up to a maximum of 5 years.
E-48 nga whārangia te nei tuhinga, tae atu ki te 5 tau tōna whai mana.





15 December 2015

Renechito Mercado Sto Domingo

21 Wellington Street
Virginia
Queensland 4014
Australia

Dear Renechito Sto Domingo

Criminal Conviction Information held by Ministry of Justice as at 15 December 2015.

MoJ request number: 3094782
Your reference: chitostodomingo@gmail.com

In response to your request received on 18 November 2015 for criminal conviction information held about you by the Ministry of Justice, I can advise there is no information held in respect of the identity particulars you have supplied, as set out below:

Name: Sto Domingo, Renechito Mercado

Date of birth: 05 October 1962

Gender: Male

Yours sincerely

Criminal Records Officer

Note: Unless specifically requested by the individual concerned, or where required by law, criminal conviction information will not be disclosed to a third party where an individual is eligible to have that information concealed under the Criminal Records (Clean Slate) Act 2004 or where that information is suppressed by statute or Court order.

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4/1 May /2016
Signed B. Wentworth
Title J.P. (QUAL)



SX10161, Wellington, New Zealand
Telephone 04 918 8800 Fax 04 918 8820
www.justice.govt.nz



15 December 2015

Leonora Donato StoDomingo

21 Wellington Street
Virginia
Queensland 4014
Australia

Dear Leonora Donato StoDomingo

Criminal Conviction Information held by Ministry of Justice as at 15 December 2015.

MoJ request number: 3094723
Your reference: chitostodomingo@gmail.com

In response to your request received on 18 November 2015 for criminal conviction information held about you by the Ministry of Justice, I can advise there is no information held in respect of the identity particulars you have supplied, as set out below:

Name: Donato StoDomingo, Leonora

Date of birth: 05 February 1964

Gender: Female

Yours sincerely

Criminal Records Officer

Note: Unless specifically requested by the individual concerned, or where required by law, criminal conviction information will not be disclosed to a third party where an individual is eligible to have that information concealed under the Criminal Records (Clean Slate) Act 2004 or where that information is suppressed by statute or Court order.

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of the original which I have sighted.*

Date 4/ May / 2016
Signed R. Venturini
Title JP (QVAD)



SX10161, Wellington, New Zealand
Telephone 04 918 8800 Fax 04 918 8820
www.justice.govt.nz

NATIONAL POLICE CERTIFICATE

AFP Ref: 2431515PC
Client Ref:

20 April 2016

Australian Federal Police
Criminal Records
Locked Bag 8550
CANBERRA CITY ACT 2601
Ph: 02 6140 6502
ABN 17 864 931 143

LEONORA DONATO STO DOMINGO
21 WELLINGTON ST
VIRGINIA QLD 4014

Complete Disclosure All recorded offences released Name Check Only

This is to certify that there are **no disclosable court outcomes** recorded against the name of:

DONATO STO DOMINGO, Leonora born on 05 February 1964

in the records of the Australian Federal Police and the police in all Australian States and Territories as at 20 April 2016.

This document is not issued as a form of identification.

Authorised by:

Co-ordinator
Criminal Records

*This is to certify that this is a true copy
of the original which I have sighted.*

Date 4/May/2016
Signed B.Wentworth
Title JP (QVL)



The information contained in this document is valid as at date displayed.

This certificate is produced on secure paper to provide proof of authenticity.

Several security features are integrated within the document, some of which are described overleaf.

This document is a copy of the original. To indicate that it is a copy, attach this label to the original document.

NATIONAL POLICE CERTIFICATE

AFP Ref: 2264812PC
Client Ref:

15 March 2016

Australian Federal Police
Criminal Records
Locked Bag 8550
CANBERRA CITY ACT 2601
Ph: 02 6140 6502
ABN 17 864 931 143

RENECHITO MERCADO STO DOMINGO
21 WELLINGTON ST
VIRGINIA QUEENSLAND 4014
NEW ZEALAND

Complete Disclosure All recorded offences released Name Check Only

This is to certify that there are **no disclosable court outcomes** recorded against the name of:

STO DOMINGO, Renechito Mercado born on 05 October 1962

in the records of the Australian Federal Police and the police in all Australian States and Territories as at 15 March 2016.

This document is not issued as a form of identification.

Authorised by:

Co-ordinator
Criminal Records

*This is to certify that this is a true copy
of the original which I have sighted.*

Date 4/ May / 2016
Signed EW Bentworth
Title JP (QUAL)



The information contained in this document is valid as at date displayed.

This certificate is produced on secure paper to provide proof of authenticity.

Several security features are integrated within the document, some of which are described overleaf.

The presence of any of the security features indicates this is not an original document.



MONITORIAL FORM NO. 102-5 (ED. DECEMBER 1, 1948)

REPUBLIC OF THE PHILIPPINES

(TO BE ACCOMPLISHED IN DUPLICATE)

D-1

951

CERTIFICATE OF LIVE BIRTH

FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER

Province:	Batangas		Register Number:		
City or Municipality:	Batangas		(a) Civil Registrar-General No.		
1. PLACE OF BIRTH			(b) Local Civil Registrar No.	528	
a. PROVINCE	Batangas		2. USUAL RESIDENCE OF MOTHER (Where does mother live?)		
b. CITY OR MUNICIPALITY	Batangas		a. PROVINCE	Batangas	
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address)	Holy Family Hospital		b. CITY OR MUNICIPALITY	BATANGAS	
d. Is PLACE OF BIRTH Inside City/Town	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		e. NUMBER AND STREET	San Pasqual, Batangas	
			f. Is RESIDENCE Inside City/Town	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
			g. Is RESIDENCE On A Farm?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
CHILD	LEONORA		Middle Name	DAVID	
6. SEX	Female		7. Is TWINS OR TRIPLETS, WAS CHILD	DONATO	
FEMALE	SINGLE <input checked="" type="checkbox"/>	TWIN <input type="checkbox"/>	1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD <input type="checkbox"/>	Month FEBRUARY 5, Year 1964	
7. NAME	MATEO B. DONATO		RELATION	Husband	
8. AGE (At time of birth)	Years 42	10. BIRTHPLACE	11a. USUAL OCCUPATION	11b. KIND OF BUSINESS OR TRADE	
		Tierra Norte		BROWN	
MOTHER	DIAZ		R. C.	NATIONALITY	
12. MARRIAGE NAME	DIAZ		13. NATIONALITY	BROWN	
14. AGE (At time of birth)	Years 35	15. BIRTHPLACE	16. PARENT DELIVERIES TO MOTHER	17. NUMBER	
		Dol Carmen, Pampanga	(Do not include this birth)	8	
17. MOTHER'S GESTATION			18. How many children are now living?	b. How many other children were born alive but are now dead?	
b. NAME IN PARENTHESIS	MATEO B. DONATO		8	c. How many total deaths (future born dead any time after birth)?	
a. ADDRESS	San Pasqual, Batangas, Batangas			NOTE	
18. MOTHER'S MARRIAGE ADDRESS (Number, Street, City or Municipality, Province)	Bo. San Pasqual, Batangas, Batangas				
19. ATTENDANT AT BIRTH			d. DATE SIGNED BY ATTENDANT AT HOME		
I declare that I attended the birth of this child who was born at 11:25 o'clock A.M. on the date above indicated.					
4. SIGNATURE:			e. TITLE OF ATTENDANT AS DOCTOR		
5. NAME OF PARENTHESIS	MATEO B. DONATO		DR. M. D.	□ MIRIBA	
6. ADDRESS	San Pasqual, Batangas, Batangas		□ NURSE	□ OTHERS (Specify)	
20. REGISTERED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR OR			21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT		
e. SIGNATURE			b. DATE WHEN GIVEN NAME WAS SUPPLIED		
22. WEIGHT AT BIRTH	6		23. LEGITIMATE	24. NO 0.560	
23. LENGTH OF PREGNANCY	12	24. LEGITIMATE	12	25. NO	0.560
25. COMPLETED WEEKS	0	26. THIS CERTIFICATE IS PREPARED BY			
26. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimate birth)	June 15, 1944		SIGNATURE		
27. CITY OR MUNICIPALITY	Manila, City, Province		NAME OF PARENTHESIS		
28. (MATERIAL)			TITLE OF POSITION		
			DATE	Feb. 5, 1964	
18-289	SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES				

This is to certify that this is a true copy
of the original which I have sighted.Date 4/ May / 2016
Signed ENVENTWORTH
Title J.P. (QUAL)

Reg. No. 84199

02284-5F-003ACM-04542-BI003

BEST POSSIBLE IMAGE

01005-A64D501-8

CARMELITA N. ERIC TA
Administrator and Civil Registrar General
National Statistics Office



Form No. 102—(Revised Dec. 1, 1953)

(TO BE ACCOMPLISHED IN DUPLICATE)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPED LETTERS)

Province:

City or Municipality:

Manila

Register Number:

(a) Civil Registrar-General No.

(b) Local Civil Registrar No. 4001 (JIN)

1. PLACE OF BIRTH	a. PROVINCE
Leon Guinto Sr., corner Herran, Manila	
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address)	Clinica Sta. Teresa
d. IS PLACE OF BIRTH INSIDE CITY LIMITS?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)	
a. PROVINCE	
b. CITY OR MUNICIPALITY	
c. NUMBER AND STREET	
d. IS RESIDENCE INSIDE CITY LIMITS?	e. IS RESIDENCE ON A FARM?
Sta. Ana, Manila	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2213 Suter	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

3. NAME (Type or print)	First: Renechito	Middle: Mercado	Last: Sto. Domingo
4. SEX	5a. THIS BIRTH	5b. IF TWIN OR TRIPLET, WAS CHILD	6. DATE OF BIRTH
Male	SINGLE <input checked="" type="checkbox"/> TWIN <input type="checkbox"/> TRIPLET <input type="checkbox"/>	1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD <input type="checkbox"/>	Month Oct. Day 5, Year 1962
7. NAME	First: Raynirio	Middle: Idbunao	Last: Sto. Domingo
9. AGE (At time of this birth)	10. BIRTHPLACE	RELIGION	8. NATIONALITY
25 Years	San Ildefonso, Bulacan	R. Catholic	Filipino Brown
12. MAIDEN NAME	First: Felicitas	Middle: Cajayon	Last: Mercado
14. AGE (At time of this birth)	15. BIRTHPLACE	RELIGION	13. NATIONALITY
27 Years	Lubang, Occ. Mindoro	R. Catholic	Filipino Brown
17a. INFORMANT'S SIGNATURE: <i>Felicitas C. Mercado</i>			
b. NAME IN PRINT: <i>Felicitas C. Mercado</i>			
c. ADDRESS 2213 Suter, Sta. Ana, Manila			
19. MOTHER'S MAILING ADDRESS: (Number, Street, City or Municipality, Province)			
Same as above			

a. How many children are now living?	b. How many other children were born alive but are now dead?	c. How many fetal deaths (fetuses born dead) at any time after conception?
0	0	0

I HEREBY CERTIFY that I attended the birth of this child who was born alive at 4:30 o'clock on the date above indicated.

c. SIGNATURE: *Mercedes*

b. NAME IN PRINT: *Mercedes C. Mercado*

c. ADDRESS: *Circulo N. Castillo, Ma. Clinica Sta. Teresa*

20. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:

a. SIGNATURE: *Mercedes*

b. NAME IN PRINT: *Mercedes C. Mercado*

c. TITLE OR POSITION: *Attendant*

d. DATE: *NOV 20 1962*

d. DATE SIGNED BY ATTENDANT AT BIRTH: *October 12, 1962*

e. TITLE OF ATTENDANT AT BIRTH:

f. M.D. Midwife

Nurse Others (Specify):

21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT:

b. DATE WHEN GIVEN NAME WAS SUPPLIED:

0550

22. LENGTH OF PREGNANCY: *36 weeks*

22b. WEIGHT AT BIRTH: *7 lbs*

lbs.

oz.

g.

mg.

kg.

23. LEGITIMATE: *No*

24. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimate birth)

SIGNATURE: *Salvador S. Arroyo*

NAME IN PRINT: *Salvador S. Arroyo*

TITLE OR POSITION: *Record Clerk*

DATE: *Oct. 12, 1962*

March 18, 1962 Sta. Ana, Manila

(Month) (Date) (Year)

City or Municipality Province

18-289

(SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES)

This is to certify that this is a true copy
of the original which I have sighted.
Date 4/1/2016
Signed B. Wentworth
Title J.P. (QVA)



05655-1B-999CBM-00162-BI001

BEST POSSIBLE IMAGE



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QJ600622155

BRen
03900-A62U526-7

Documentary
Stamp Tax Paid

Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

New Zealand Birth Certificate

Te Tohu Whānautanga ki Aotearoa



Child / Tamaiti

First/given name(s)
 Ingoa tapa **Maverick James Donato**

 Surname/family name
 Ingoa whānau **Sto Domingo**

 First/given name(s) at birth*
 Ingoa tapa i te whānautanga mai*

 Surname/family name at birth*
 Ingoa whānau i te whānautanga mai*

 Sex
 Tāne, wahine rānei **Male**

 Still-birth/multiple birth (if applicable)
 I whānau kahu mai/i whānau
 whakarea mai (mēnā e hāngai ana)

 Date of birth
 Te rā i whānau ai **7 December 2005**

 Place of birth
 Te wāhi i whānau ai **Lower Hutt Hospital**

 Name changes
 Ngā whakarerekētanga ingoa

Mother / Whāea

First/given name(s)
 Ingoa tapa **Leonora Donato**

 Surname/family name
 Ingoa whānau **Sto Domingo**

 First/given name(s) at birth**
 Ingoa tapa i te whānautanga mai** **Leonora**

 Surname/family name at birth**
 Ingoa whānau i te whānautanga mai** **Donato**

 Date of birth
 Te rā i whānau ai **5 February 1964**

 Place of birth
 Te wāhi i whānau ai **Batangas Philippines**

Father / Matua

First/given name(s)
 Ingoa tapa **Reneechito**

 Surname/family name
 Ingoa whānau **Sto Domingo**

 First/given name(s) at birth**
 Ingoa tapa i te whānautanga mai**

 Surname/family name at birth**
 Ingoa whānau i te whānautanga mai**

 Date of birth
 Te rā i whānau ai **5 October 1962**

 Place of birth
 Te wāhi i whānau ai **Manila Philippines**

*I do verify that this is a true copy
 of the original which I have sighted.*
4/5/2016
Signed
BWentworth
file
JF (QMC)



* If name has changed / Mēnā kua rerekē te ingoa
 ** If different from above / Mēnā he rerekē ki tērā o runga ake

Certified to be a true copy of the above particulars included in an entry recorded in this office.
 E pono ana te kī he tauira tūturu tēnei o ngā kōrero o runga ake nei kua tuhia ki tētahi puka i tēnei tari.

Issued under the seal of the Registrar on 19 December 2005
 I tukuna i raro i te maru o te Pouroki i te 19 Hakihea 2005

WARNING: THIS CERTIFICATE IS NOT EVIDENCE OF THE IDENTITY OF THE PERSON PRESENTING IT
KIA TŪPATO: EHARA TĀ TĒNEI TIWHIKETE I TE TAUNAKI I TE TUAKIRI O TE TANGATA KA TĀPAE ATU

CAUTION: Any person who (1) falsifies any of the particulars on the certificate, or (2) uses it as true, knowing it to be false, is liable to prosecution under the Crimes Act 1961.
 WHAKAOHITI: Ko te tangata (1) ka whakarerekē i ngā kōrero o tēnei tiwhikete, (2) ka whakamahi anō he pono, me te mōhio anō kei te hori kē, ka laea te whakawhiu i raro i te Ture Takahi Ture 1961.

Registration Number / Te Tau ā-Motu

2005061905





dated 4/ May/2016
signed by Gwentworth
T.P. (QUAL)

MARRIAGE CONTRACT

City or Municipality of QUEZON CITY Province of PHILIPPINES

	Husband	Wife
Contracting Parties	<u>RENEECHITO M. STO. DOMINGO</u>	<u>LEONORA D. DONATO</u>
(a) Age and Birthdate	<u>24 yrs. old</u>	<u>23 yrs. old</u>
(b) Birthplace	<u>Manila</u>	<u>Batangas</u>
(e) Nationality	<u>Filipino</u>	<u>Filipino</u>
(d) Residence	<u>B24 Lot 5 Dunsugue St., South City Homes, Biñan, Laguna</u>	<u># 39-E Morato St., Q.C.</u>
Single, widowed or divorced	<u>Single</u>	<u>Single</u>
Father	<u>Reynirio L. Sto. Domingo</u>	<u>Nateo R. Donato</u>
Nationality	<u>Filipino</u>	<u>Filipino</u>
Mother	<u>Felicites M. Sto. Domingo</u>	<u>Lourdes D. Donato</u>
Nationality	<u>Filipino</u>	<u>Filipino</u>
Witnesses	<u>Mr. Benjamin B. Olonan</u>	<u>Mrs. Monserat Guzman</u>
Residence	<u>Meycauayan, Bulacan</u>	<u>Riverside, Pasig, M.M.</u>
Persons who gave consent or advice		
(a) Residence		<u>BOTH OF LEGAL AGE</u>
(b) Relation to contracting party		

Place of marriage { Office of the Church of House of Barrio of } SACRED HEART PARISH CHURCH - KAMUNTING - QUEZON CITY

Date of marriage MARCH 30, 1987

Marriage solemnized by Fr. Fermin Galolo Jr., SVD

(a) Asst. Parish Priest (b) 1141 Sec. Montebello St., Blk. Quazon City
(Position) (Address)

THIS IS TO CERTIFY That I, RENEECHITO M. STO. DOMINGO and

I, LEONORA D. DONATO on the date and at the place above given, of our own free will and accord, and in the presence of the person solemnizing this marriage and of the two witnesses named below, both of age, take each other as husband and wife.

And I, Fr. Fermin Galolo Jr., SVD, Asst. Parish Priest
(Position)

CERTIFY: That on the date and at the place above written the aforesaid RENEECHITO M. STO. DOMINGO and LEONORA D. DONATO were with their mutual consent lawfully joined together in holy matrimony by me in the presence of said witnesses, both of age; and I further certify that the Marriage License No. _____, issued at Rodriguez, Rizal on March 26, 1987 in favor of said parties, was exhibited to me or no marriage licensed was exhibited to me this marriage being of an exceptional character performed under Art. _____ of Rep. Act. 386; and that consent or advice to such marriage was duly given, as required by law, by the person or persons above mentioned.

IN WITNESS WHEREOF, we signed, (or marked with our fingerprint) this certificate in triplicate this 30th. day of March, 19 87.

RENEECHITO M. STO. DOMINGO
(Contracting Party)

LEONORA D. DONATO
(Contracting Party)

REV. FR. FERMIN GALOLO, JR., SVD

(Judge, Justice of the Peace, Mayor, Priest, Minister, etc.)
Authorization No. 1000 Faculty expires on Dec 1988

MR. BENJAMIN B. OLONAN

MR. NORBERTO ALENHIELA

MR. OSCAR REANTASO

WITNESSES

MRS. HISPINTIA MATIAP

Monserat A. Guzman
MRS. JEWELINE O. SANTICO