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IDENTIFICATION CARD



Name: Geoff Sample

D.O.B: Area manager

ID No: 1238626AB4

Issued: January 2016

Expires: December 2018

WILLIAMS

Maintenance Services



OREIGN SERVICE OF THE PHILEPINES 3000 Washing Park. Str. 500 Los Argelias CA 90010

REPORT OF BIRTH CHILD BORN ABROAD OF PHILIPPINE PARENT OR PARENTS

Name of Child	First Name (Monters Makes	Name) Sex Male Female
Date of Sinh	Manchs (Day) Yeart	Ploof Mail
Place of Birth	INTERNAL PROPERTY.	collectual Collectuals
	(Cxy / Town)	(Charle)
ALC: HILL	FATHER	MOTHER
Full Martie	SALES SCHOOL SECTION	Full Name
Civil Status ective time of the st	MARRIÉD INFO HIND	Civil Status MARRIED [at the Union of the CHECKSHIP]
Onizenship active time of the ci	PHEIPPINES HATCHING	Citizenship UNITED STATES OF AMERICA
Beligion		Religion Caraca III
Date of Birth	NAME OF TAXABLE PARTY.	Date of Birth CHROTEE
Present Address	MARK TO REPORT PROPERTY AND ADDRESS OF	Fresent Address
Occupation:	Section District Supplies	Occupation
Passport No. / Gov't Issued Id		Passport No./ Gov't Issued Id
Date Issued	September 1	Date issued
trived by	temporarie (Contractor) interests	Based by Authornite M. reasonwealer for shado
Vidid Until	***	Valid Until Market Et a
	Children / Number of Children now Living	The state of the s
		Signature of Parent, Physician or Nur
IMPORTAN	T; IF PARENT, PHYISICIAN OR NURSE IS UN	ABLE TO APPLY IN PERSON. THIS FORM SHALL BE NOTARIZED
SUBSCRIBE	O AND SWORK to be before this day	of Total NOTARY PUBLIC
The foregoin	ng information was furnished by And	supported by
C'Estrer		Ndevit C Physician Certificate
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		Char Consul of the Philippines

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