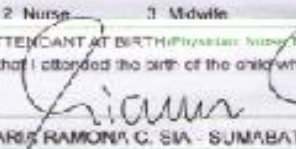
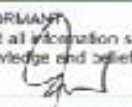
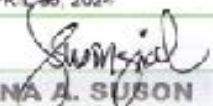


(Revised August 2018)

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

Province LEYTE		Registry No. 2024-2478	
City/Municipality ORMOC CITY			
CHILD	1. NAME (First) (Middle) (Last) DHONNI EZEKIEL GOYO GACUTAN		
	2. SEX (Male / Female) MALE	3. DATE OF BIRTH (Day) (Month) (Year) 29 APRIL 2024	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province) ORMOC DOCTORS HOSPITAL, C. AVILES COR. SAN PABLO ST., ORMOC CITY, LEYTE		
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) SINGLE	5b. IF MULTIPLE BIRTH CHILD WAS (First, Second, Third, etc.) NOT APPLICABLE	5c. BIRTH ORDER (Only if applicable to provide name the nursing infant/s) (First, Second, Third, etc.) THIRD
	5. WEIGHT AT BIRTH 2.850 grams		
MOTHER	7. MAIDEN NAME (First) (Middle) (Last) LYNDEL MONTIMAN GOYO		
	8. CITIZENSHIP FILIPINO		9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
	10a. Total number of children born alive 3	10b. No. of children still living including this birth 2	10c. No. of children born alive but are now dead 1
	11. OCCUPATION AGRICULTURIST		12. AGE at the time of this birth (completed years) 32
	13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) DUPLEX G2, VISCA, PANGASUGAN BAYBAY CITY LEYTE PHILIPPINES		
FATHER	14. NAME (First) (Middle) (Last) MANUEL JR. DATIG GACUTAN		
	15. CITIZENSHIP FILIPINO		16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
	17. OCCUPATION COLLEGE TEACHER		18. AGE at the time of this birth (completed years) 37
	19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) DUPLEX G2, VISCA, PANGASUGAN BAYBAY CITY LEYTE PHILIPPINES		
	MARRIAGE OF PARENTS (If not married, acknowledge Affidavit of Acknowledgment/Acmission of Paternity at the back.)		
20a. DATE (Month) (Day) (Year) FEBRUARY 28 2015		20b. PLACE (City / Municipality) (Province) (Country) ABUYOG LEYTE PHILIPPINES	
21a. ATTENDANT X 1. Physician 2. Nurse 3. Midwife 4. Illicit/Traditional Birth Attendant 5. Others (Specify)			
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, etc.) I hereby certify that I attended the birth of the child who was born alive 9:01 AM am/pm on the date of birth specified above.			
Signature 		Address ORMOC DOCTORS HOSPITAL	
Name in Print MARIA RAMONA C. SIA - SUMABAT, M.D.		C. AVILES COR. SAN PABLO ST., ORMOC CITY	
Title or Position ATTENDING PHYSICIAN		Date APRIL 30, 2024	
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief.		23. PREPARED BY	
Signature 		Signature 	
Name in Print MANUEL JR. D. GACUTAN		Name in Print JANELLE LAUREL PARRILLA	
Relationship to the Child FATHER		Title or Position MEDICAL RECORDS STAFF	
Address G2 DUPLEX, VISCA, PANGASUGAN, BAYBAY CITY, LEYTE		Date APRIL 30, 2024	
Date APRIL 30, 2024			
24. RECEIVED BY Signature 		25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR	
Name in Print GINA A. SUSON		Signature 	
Title or Position Admin. Aide (J.O.)		Name in Print MAKABAYANG R. NIEL	
Date MAY 14 2024		Registration Office LCRO - Ormoc City	
		Title or Position MAY 14 2024	
		Date	
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)			



Philippine Statistics Authority
Form No. 97
Revised January 2007

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

(To be accomplished in quadruplicate using black ink)

CERTIFICATE OF MARRIAGE

Province **LEYTE** Registry No. **2015-455**
City/Municipality **ABUYOG**

HUSBAND **WIFE**
1. Name of Contracting Parties **MANUEL, JR. DATIG GACUTAN** **LYNDEL MONTIMAN GOYO**

2a. Date of Birth **2b. Age** **17 June 1996** **20** **21 March 1992** **22**

3. Place of Birth **MAHAPLAG, LEYTE PHILIPPINES** **ABUYOG, LEYTE PHILIPPINES**

4a. Sex **MALE** **FILIPINO** **FEMALE** **FILIPINO**

5. Residence **Brgy. Guadalupe Baybay, Leyte** **Brgy. Pagsang'an Abuyog, Leyte**

6. Religion **ROMAN CATHOLIC** **ROMAN CATHOLIC**

7. Civil Status **SINGLE** **SINGLE**

8. Name of Father **MANUEL GACUTAN, SR.** **ANTONIO C. GOYO**

9. Citizenship **FILIPINO** **FILIPINO**

10. Maiden Name of Mother **NILDA DATIG** **ELISA S. MONTIMAN**

11. Citizenship **FILIPINO** **FILIPINO**

12. Name of Parent (or Parents) **N/A** **N/A**

13. Relationship **N/A** **N/A**

14. Residence **N/A** **N/A**

15. Place of Marriage **ST. FRANCIS XAVIER PARISH** **ABUYOG** **LEYTE**
(Office of the Minister of the Gospel) (City/Municipality) (Province)

16. Date of Marriage **28 February 2015** (V. Time of Marriage) **1000 AM**

17. CERTIFICATION OF THE CONTRACTING PARTIES
This is to certify that **Manuel D. Gacutan, Jr.** and **Lynzel M. Goyo**, both of legal age, of our own free will and accord, and in the presence of the person solemnizing the marriage and of the witnesses named below, take each other as husband and wife and solemnly declare that we have entered into a genuine and lawful marriage.

IN WITNESS WHEREOF, we hereunto signed our names and the witnesses named below, at **Abuyog, Leyte**, on **28 February 2015**.

MANUEL D. GACUTAN, JR. **LYNDEL M. GOYO**
(Signature of Husband) (Signature of Wife)

18. CERTIFICATION OF THE SOLEMNIZING OFFICER
This is to certify that **MANUEL D. GACUTAN, JR.** and **LYNDEL M. GOYO**, both of legal age, of our own free will and accord, and in the presence of the person solemnizing the marriage and of the witnesses named below, take each other as husband and wife and solemnly declare that we have entered into a genuine and lawful marriage.

I CERTIFY FURTHER THAT:
a. Marriage License No. **0090125** issued on **February 10, 2015** at **Abuyog, Leyte**
b. In favor of said parties, was submitted to me.
c. No marriage license was necessary; the marriage being solemnized under Art. 1 of Executive Order No. 326.

d. The marriage was solemnized in accordance with the provisions of Presidential Decree No. 1960.

REV. FR. PASTOR R. CARRION, JR. **Parochial Vicar** **2014-27343NH/FUL.2016**

(Signature Over Printed Name of Solemnizing Officer) (Position/Designation) (Religion/Religion and Registry Number Expiration Date, if applicable)

20. WITNESSES (At least two witnesses, one male and one female, of legal age, of our own free will and accord, and in the presence of the person solemnizing the marriage and of the witnesses named below, take each other as husband and wife and solemnly declare that we have entered into a genuine and lawful marriage.)

MR. EDUARDO NIENA **MRS. ROSARIO TOBAS** **MR. CHAS GONZA** **MRS. OLGA MAYE**

21. RECEIVED BY **Signature** **Signature**

Name in Print **FRANCIS R. PETERSON** **Signature** **Signature**

Title or Position **Clerk** **Municipal Clerk**

Date **March 4, 2015** **March 4, 2015**

REMARKS/ANNOTATIONS (For LCR/OCRG/Star's Circuit Registrar Use Only)

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

42A 42B 42C 42D 42E 42F 42G 42H 42I 42J

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BEST POSSIBLE IMAGE



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Documentary
Stamp Tax Paid

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

