



## ALLIED CARE EXPERTS MEDICAL CENTER – BOHOL

0368 AS Bioco St., Carlos P. Garcia East Avenue,  
Mansasa District, Tagbilaran City, Bohol 6300  
(038) 412-8888 | +639 0548 85024 | +639 4971 67106

# Medical Certificate

### TO WHOM IT MAY CONCERN:

This is to certify that PRADERA, SHANEMIE CARELLE DAQUIO had been under treatment/ confined at Allied Care Experts (ACE) Medical Center- Bohol from AUGUST 04, 2022 to AUGUST 06, 2022 for the following:

### DIAGNOSIS:

1. G1P1(1-0-0-11)
2. Pregnancy Uterine 39 6/7 weeks Cephalic not in labor, Anhydramnios ; operative delivery extracted a live term baby boy, Apgar score 8-9-10, Birthweight 3290 grams, Ballard score 38-39 weeks, absent amniotic fluid

### OPERATION/ PROCEDURE:

- Emergency Primary Low Transverse Cesarean Section

### REMARKS: none

Issued this 12th day of August 2022 at Tagbilaran City, Bohol, Philippines for Work purposes.

ALLIED CARE EXPERTS  
MEDICAL CENTER - BOHOL  
MEDICAL RECORDS SECTION

SIGNATURE: Rechele B. Bandal  
NAME: Rechele B. Bandal  
DATE: 8/12/22

POSITION: \_\_\_\_\_  
DATE: \_\_\_\_\_

Stella Maris Amora-Escobia  
Stella Maris Amora-Escobia, MD, FPOGS  
Attending Physician  
PTR No.: 0980632  
Lic. No.: 67491

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL

**CERTIFICATE OF LIVE BIRTH**

Province <b>BOHOL</b>		Registry No. <b>2022-3243</b>	
City/Municipality <b>TAGBILARAN</b>			
<b>CHILD</b>	1. NAME (First) (Middle) (Last) <b>SHAUGHN CARLOS DAQUIO PRADERA</b>		
	2. SEX (Male / Female) <b>MALE</b>	3. DATE OF BIRTH (Day) (Month) (Year) <b>04 AUGUST 2022</b>	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province) <b>Allied Care Experts Medical Center - Bohol, Mansasa, TAGBILARAN CITY BOHOL</b>		
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) <b>SINGLE</b>	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) <b>N/A</b>	5c. BIRTH ORDER (Order of this birth to previous live births excluding fetal death) (First, Second, Third, etc.) <b>FIRST</b>
	6. WEIGHT AT BIRTH <b>3,290</b> grams		
<b>MOTHER</b>	7. MAIDEN NAME (First) (Middle) (Last) <b>SHANEMIE CARELLE OLIVER DAQUIO</b>		
	8. CITIZENSHIP <b>FILIPINO</b>		9. RELIGION/RELIGIOUS SECT <b>Roman Catholic</b>
	10a. Total number of children born alive <b>1</b>	10b. No. of children still living including this birth <b>1</b>	10c. No. of children born alive but are now dead <b>0</b>
	11. OCCUPATION <b>GOVERNMENT EMPLOYEE</b>		12. AGE at the time of this birth (completed years) <b>32</b>
	13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) <b>HOUSE 82 BRGY. DAO TAGBILARAN CITY BOHOL PHILIPPINES</b>		
<b>FATHER</b>	14. NAME (First) (Middle) (Last) <b>CARL LEONARD MONREAL PRADERA</b>		
	15. CITIZENSHIP <b>FILIPINO</b>	16. RELIGION/RELIGIOUS SECT <b>ROMAN CATHOLIC</b>	17. OCCUPATION <b>VETERINARIAN</b>
	18. AGE at the time of this birth (completed years) <b>28</b>		
	19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) <b>UBOJAN LOON BOHOL PHILIPPINES</b>		
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)			
20a. DATE (Month) (Day) (Year) <b>AUGUST 29 2021</b>		20b. PLACE (City / Municipality) (Province) (Country) <b>Tagbilaran City Bohol Philippines</b>	
21a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Hilot (Traditional Birth Attendant) <input type="checkbox"/> 5 Others (Specify)			
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.) I hereby certify that I attended the birth of the child who was born alive at <b>05:17 PM</b> m/pm on the date of birth specified above.			
Signature  Name in Print <b>STELLA MARIS AMORA ESCOBIA, MD, FPOGS</b> Title or Position <b>ATTENDING PHYSICIAN</b>		Address <b>Allied Care Experts Medical Center - Bohol, Mansasa, Tagbilaran City</b> Date <b>August 05, 2022</b>	
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief. Signature  Name in Print <b>CARL LEONARD MONREAL PRADERA</b> Relationship to the Child <b>FATHER</b> Address <b>LOON, BOHOL</b> Date <b>August 05, 2022</b>		23. PREPARED BY Signature  Name in Print <b>RECHELL KUDEMUS BONDAL</b> Title or Position <b>Medical Records Clerk</b> Date <b>August 05, 2022</b>	
24. RECEIVED BY Signature  Name in Print <b>GLORIA TIGNO</b> Title or Position <b>Regn. Officer II</b> Date <b>August 12, 2022</b>		25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR Signature  Name in Print <b>JUBELYN N. PULGARINAS</b> Title or Position <b>Officer-In-Charge</b> Date <b>August 12, 2022</b>	
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)			
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR			
8 1 9 11 13 15 16 17 19 0 1 0 8 0 9 3 6 0 8 0 1 2 4 2 0 1 0 8 2 2 2 6 0 8 0 1 2 3 0			

## CERTIFICATE OF MARRIAGE

Province **Bohol**City/Municipality **Tagbilaran**

Registry No.

**2021-413**

1. Name of Contracting Parties	<b>HUSBAND</b> (First) <b>CARL LEONARD</b> (Middle) <b>MONREAL</b> (Last) <b>PRADERA</b>	<b>WIFE</b> (First) <b>SHANEMIE CARELLE</b> (Middle) <b>OLIVER</b> (Last) <b>DAQUIO</b>
2a. Date of Birth 2b. Age	<b>16</b> (Day) <b>February</b> (Month) <b>1994</b> (Year) <b>27</b> (Age)	<b>27</b> (Day) <b>July</b> (Month) <b>1990</b> (Year) <b>30</b> (Age)
3. Place of Birth	<b>Tagbilaran City</b> (City/Municipality) <b>Bohol</b> (Province) <b>Philippines</b> (Country)	<b>Tagbilaran City</b> (City/Municipality) <b>Bohol</b> (Province) <b>Philippines</b> (Country)
4a. Sex 4b. Citizenship	<b>Male</b> (Sex) <b>Filipino</b> (Citizenship)	<b>Female</b> (Sex) <b>Filipino</b> (Citizenship)
5. Residence	<b>Ubojan, Loon, Bohol</b> (House No., St., Barangay, City/Municipality, Province, Country)	<b>House 82 Mabuhay Village Dao Dist, Tagbilaran City, Bohol Philippines</b> (House No., St., Barangay, City/Municipality, Province, Country)
6. Religion/ Religious Sect	<b>Roman Catholic</b>	<b>Roman Catholic</b>
7. Civil Status	<b>Single</b>	<b>Single</b>
8. Name of Father	<b>Leonardo</b> (First) <b>Gutierrez</b> (Middle) <b>Pradera</b> (Last)	<b>Luciano</b> (First) <b>Bete</b> (Middle) <b>Daquio</b> (Last)
9. Citizenship	<b>Filipino</b>	<b>Filipino</b>
10. Maiden Name of Mother	<b>Carmelita</b> (First) <b>Coritico</b> (Middle) <b>Monreal</b> (Last)	<b>Carolyn May</b> (First) <b>Bungabong</b> (Middle) <b>Oliver</b> (Last)
11. Citizenship	<b>Filipino</b>	<b>Filipino</b>
12. Name of Person/ Who Gave Consent or Advice	<b>n.a.</b> (First) <b>n.a.</b> (Middle) <b>n.a.</b> (Last)	<b>n.a.</b> (First) <b>n.a.</b> (Middle) <b>n.a.</b> (Last)
13. Relationship	<b>n.a.</b>	<b>n.a.</b>
14. Residence	<b>SHRINE OF ST. JUDE THADDEUS</b> (House No., St., Barangay, City/Municipality, Province, Country)	<b>Tagbilaran City Bohol</b> (House No., St., Barangay, City/Municipality, Province, Country)

15. Place of Marriage: **SHRINE OF ST. JUDE THADDEUS** (Office of the/House of/Barangay of/Church of/Mosque of) **Tagbilaran City** (City/Municipality) **Bohol** (Province)  
**29** (Day) **August** (Month) **2021** (Year) **1:00 P.M.** (Time of Marriage)

16. Date of Marriage: **29** (Day) **August** (Month) **2021** (Year)

17. Time of Marriage: **1:00 P.M.** (Time of Marriage)

18. CERTIFICATION OF THE CONTRACTING PARTIES:  
THIS IS TO CERTIFY THAT I, **CARL LEONARD M. PRADERA** and I, **SHANEMIE CARELLE O. DAQUIO**, both of legal age, of our own free will and accord, in the presence of the person solemnizing this marriage and of the witnesses named below, take each other as husband and wife and certify that we have entered, a copy of which is hereto attached / have entered into a legal marriage on **29** (Day) **August** (Month) **2021** (Year).  
IN WITNESS WHEREOF, we have signed /marked with our fingerprint this certificate in quadruplicate this **29** (Day) of **August** (Month) **2021** (Year).  
**CARL LEONARD M. PRADERA** (Signature of Husband)  
**SHANEMIE CARELLE O. DAQUIO** (Signature of Wife)

19. CERTIFICATION OF THE SOLEMNIZING OFFICER:  
THIS IS TO CERTIFY THAT BEFORE ME, on the date and place above-written, personally appeared the above-mentioned parties, with their mutual consent, lawfully joined together in marriage which was solemnized by me in the presence of the witnesses named below, all of legal age.  
I CERTIFY FURTHER THAT: **0075415** (Marriage License No.) **July 23, 2021** (Date of Issuance) **Loon, Bohol** (Place of Issuance)

a. Marriage License No. **0075415** issued on **July 23, 2021** at **Loon, Bohol**  
in favor of said parties, was exhibited to me.  
b. no marriage license was necessary, the marriage being solemnized under Art. **1007** of Executive Order No. 209.  
c. the marriage was solemnized in accordance with the provisions of Presidential Decree No. 1083.

**REV. FR. ABSALON FLORENOS** (Signature Over Printed Name of Solemnizing Officer) **CATHOLIC PRIEST** (Position/Designation) **Reg. No. 28TQ24EWYZ** (Religion/Religious Sect, Registry No. and Expiration Date, if applicable) **exp. December, 2021**

20a. WITNESSES (Print Name and Sign):  
**HON. MANUEL Y. INGUIITO** (Signature) **MRS. GRACIA F. ARADO** (Signature) **HON. VITO B. RAPAL** (Signature) **MRS. CIRILA M. KHO** (Signature)

21. RECEIVED BY  
Signature **RIZALINA PUMATONG**  
Name in Print **Regn. Officer II**  
Title or Position **September 3, 2021**  
Date

22. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature **JACOB B. SEVILLA**  
Name in Print **Regn. Officer III**  
Title or Position **September 3, 2021**  
Date

REMARKS/ANNOTATIONS (For LCRO/OCRG/Shari'a Circuit Registrar Use Only)

20b. WITNESSES (Print Name and Sign):

MR. JUN ALGUIN B. OLIVER

MRS. MA. LYDIA D. SANTUGAN

MR. CLEOFAS G. OMBINA

MRS. LYDIA P. OMBINA

DR. DEWY A. DEMANDANTE

DR. REINA JANE V. DAMANDANTE

### AFFIDAVIT OF SOLEMNIZING OFFICER

I, \_\_\_\_\_ of legal age, Solemnizing Officer of \_\_\_\_\_ with address at \_\_\_\_\_, after having sworn to in accordance with law, do hereby depose and say:

1. That I have solemnized the marriage between \_\_\_\_\_ and \_\_\_\_\_;
2. ☐ a. That I have ascertained the qualifications of the contracting parties and have found no legal impediment for them to marry as required by Article 34 of the Family Code;
- ☐ b. That this marriage was performed in articulo mortis or at the point of death;
- ☐ c. That the contracting party/ies \_\_\_\_\_ and \_\_\_\_\_, being at the point of death and physically unable to sign the foregoing certificate of marriage by signature or mark, one of the witnesses to the marriage; sign for him or her by writing the dying party's name and beneath it, the witness' own signature preceded by the preposition "By";
- ☐ d. That the residence of either party is so located that there is no means of transportation to enable concerned party/parties to appear personally before the civil registrar;
- ☐ e. That the marriage was among Muslims or among members of the Ethnic Cultural Communities and that the marriage was solemnized in accordance with their customs and practices;
3. That I took the necessary steps to ascertain the ages and relationship of the contracting parties and that neither of them are under any legal impediment to marry each other;
4. That I am executing this affidavit to attest to the truthfulness of the foregoing statements for all legal intents and purposes.

In truth whereof, I have affixed my signature below this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, Philippines.

Signature Over Printed Name of the Solemnizing Officer

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, Philippines, affiant who exhibited to me his/her CTC/valid ID

issued on \_\_\_\_\_ at \_\_\_\_\_

Signature of the Administering Officer

Position/Title/Designation

Name in Print

Address

### AFFIDAVIT FOR DELAYED REGISTRATION OF MARRIAGE

I, \_\_\_\_\_ of legal age, single/married/divorced/widow/widower, with residence and postal address \_\_\_\_\_, after having duly sworn in accordance with law do hereby depose and say:

1. That I am the applicant for the delayed registration of

☐ my marriage with \_\_\_\_\_ in \_\_\_\_\_ on \_\_\_\_\_  
☐ the marriage between \_\_\_\_\_ and \_\_\_\_\_ in \_\_\_\_\_ on \_\_\_\_\_

2. That said marriage was solemnized by \_\_\_\_\_ (Solemnizing Officer's name) under

a. ☐ religious ceremony b. ☐ civil ceremony c. ☐ Muslim rites d. ☐ tribal rites

3. That the marriage was solemnized:

☐ a. with marriage license no. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_;  
☐ b. under Article \_\_\_\_\_ (marriages of exceptional character);

4. (If the applicant is either the wife or husband) That I am a citizen of \_\_\_\_\_ and my spouse is a citizen of \_\_\_\_\_;

(If the applicant is other than the wife or husband) That the wife is a citizen of \_\_\_\_\_ and the husband is a citizen of \_\_\_\_\_;

5. That the reason for the delay in registering our/their marriage is \_\_\_\_\_;

6. That I am executing this affidavit to attest to the truthfulness of the foregoing statements for all legal intents and purposes.

In truth whereof, I have affixed my signature below this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, Philippines.

Signature Over Printed Name of Affiant

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_

\_\_\_\_\_, Philippines, affiant who exhibited to me his/her CTC/valid ID

issued on \_\_\_\_\_ at \_\_\_\_\_

Signature of the Administering Officer

Position/Title/Designation

Name in Print

Address