

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL

# CERTIFICATE OF LIVE BIRTH

Province **LEYTE**

Registry No.

**2022 - 1878**

City/Municipality **CITY OF BAYBAY**

C H I L D	1. NAME (First) (Middle) (Last) <b>MIGUEL LUIS CUARTEROS TAMBIS</b>	
	2. SEX (Male / Female) <b>MALE</b>	3. DATE OF BIRTH (Day) (Month) (Year) <b>04 NOVEMBER 2022</b>
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province) <b>WESTERN LEYTE PROVINCIAL HOSPITAL CITY OF BAYBAY LEYTE</b>	
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) <b>SINGLE</b>	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) <b>NOT APPLICABLE</b>
	5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.) <b>THIRD</b>	
	6. WEIGHT AT BIRTH <b>2820</b> grams	
M O T H E R	7. MAIDEN NAME (First) (Middle) (Last) <b>MARIA LOUELLA BATOY CUARTEROS</b>	
	8. CITIZENSHIP <b>FILIPINO</b>	
	9. RELIGION/RELIGIOUS SECT <b>ROMAN CATHOLIC</b>	
	10a. Total number of children born alive <b>03</b>	10b. No. of children still living including this birth <b>03</b>
	10c. No. of children born alive but are now dead <b>00</b>	
	11. OCCUPATION <b>COLLEGE INSTRUCTOR</b>	
12. AGE at the time of this birth (completed years) <b>39</b>		
F A T H E R	13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) <b>BRGY. PANGASUGAN CITY OF BAYBAY LEYTE PHILIPPINES</b>	
	14. NAME (First) (Middle) (Last) <b>MARLON MAGALONA TAMBIS</b>	
	15. CITIZENSHIP <b>FILIPINO</b>	
	16. RELIGION/RELIGIOUS SECT <b>ROMAN CATHOLIC</b>	
	17. OCCUPATION <b>COLLEGE AND UNIVERSITY PROFESSOR</b>	
	18. AGE at the time of this birth (completed years) <b>40</b>	
19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) <b>BRGY. PANGASUGAN CITY OF BAYBAY LEYTE PHILIPPINES</b>		
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)		
20a. DATE (Month) (Day) (Year) <b>DECEMBER 16, 2010</b>		
20b. PLACE (City / Municipality) (Province) (Country) <b>JAGNA 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>08:55 AM</b> am/pm on the date of birth specified above.		
Signature _____ Address <b>W.L.P.H. BAYBAY CITY, LEYTE</b>		
Name in Print <b>REGINA C. FULVADORA, MD</b>		
Title or Position <b>OB/GYNE</b> Date <b>NOVEMBER 4, 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>MARIA FE M. TAMBIS</b>		
Relationship to the Child <b>GRANDMOTHER</b>		
Address <b>BRGY. PANGASUGAN, BAYBAY CITY, LEYTE</b>		
Date <b>NOVEMBER 5, 2022</b>		
23. PREPARED BY		
Signature _____		
Name in Print <b>CINCINTA S. MORENO</b>		
Title or Position <b>ADMINISTRATIVE AIDE-I</b>		
Date <b>NOVEMBER 5, 2022</b>		
24. RECEIVED BY		
Signature _____		
Name in Print <b>TERESITA MUÑEZ-CARTON</b>		
Title or Position <b>Administrative Officer II</b>		
Date <b>NOV 04 2022</b>		
25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR		
Signature _____		
Name in Print <b>NOEL V. MANAGBANAG</b>		
Title or Position <b>CITY CIVIL REGISTRAR</b>		
Date <b>NOV 07 2022</b>		
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)		
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR		
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