

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

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

(Fill out completely, accurately and legibly. Use ink or typewriter.
Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)

Province LITCity/Municipality Imus

Registry No.

9500571

REMARKS/ANNOTATION

1. NAME (First) (Middle) (Last)
JOVANA MARIE BERNARD BERNARD

2. SEX

1 Male 2 Female

3. DATE OF BIRTH (day) (month) (year)

12 Sept. 19954. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)Barangay Imus

5a. TYPE OF BIRTH

1 Single 2 Twin
3 Triplet, etc.

b. IF MULTIPLE BIRTH, CHILD WAS

1 First 2 Second
3 Others, Specifyc. BIRTH ORDER (live births and fetal deaths including this delivery)
second (first, second, third, etc.)

d. WEIGHT AT BIRTH

3600 grams

6. MAIDEN NAME (First) (Middle) (Last)

JOVANA MARIE

7. CITIZENSHIP

Philippine

8. RELIGION

Catholic9a. Total number of children born alive: 02b. No. of children still living including this birth: 02c. No. of children born alive but are now dead: 00

10. OCCUPATION

Housewife11. Age at the time of this birth: 20 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)

Barangay ImusImusLIT

13. NAME (First) (Middle) (Last)

JOVANA MARIE

(Middle)

(Last)

14. CITIZENSHIP

Philippine

15. RELIGION

Catholic

16. OCCUPATION

Housewife17. Age at the time of this birth: 27 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)

January 30, 1995 - Imus, LIT

19a. ATTENDANT

1 Physician 2 Nurse 3 Midwife
4 Hilot (Traditional Midwife) 5 Others (Specify)

19b. CERTIFICATION OF BIRTH

I hereby certify that I attended the birth of the child who was born alive at 10:00am o'clock am/pm on the date stated above.Signature [Signature]
Name in Print JOVANA MARIE
Title or Position MidwifeAddress Barangay Imus
Imus, LIT
Date Sept. 12, 1995

20. INFORMANT

Signature [Signature]
Name in Print JOVANA MARIE
Relationship to the child ParentAddress Barangay Imus
Imus, LIT
Date September 12, 1995

21. PREPARED BY

Signature [Signature]
Name in Print Lisa Grace S. Bersales
Title or Position Local Civil Registrar
Date October 2, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature [Signature]
Name in Print Lisa Grace S. Bersales
Title or Position Local Civil Registrar
Date October 2, 1995For OCRG USE ONLY:
Population Reference No.3721-A95TC01-8TO BE FILLED UP AT THE
OFFICE OF THE CIVIL
REGISTRAR

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9500571

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1

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2120995

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37218

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1

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023629

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020200

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37218

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111600

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BEST POSSIBLE IMAGE

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[03721-A95TC03-2]Documentary
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Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority



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Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR
INOPACAN, LEYTE

June 6, 2016

TO WHOM IT MAY CONCERN:

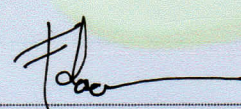
We certify that, among others, the following facts of birth appear in our Register of Births on page 0050 of book number 014:

Registry number	: B9-500571
Date of Registration	: October 03, 1995
Population Reference No.	:
Name of child	: JOVIE MARIEL L. DEGORIO
Sex	: Female
Date of birth	: September 12, 1995
Place of birth	: INOPACAN, LEYTE
Name of mother	: EDITHA C. LAWAG
Citizenship of mother	: FILIPINO
Name of Father	: DEVESIDERIO P. DEGORIO
Citizenship of father	: FILIPINO
Date of marriage of parents	: January 30, 1993
Place of marriage of parents	: INOPACAN, LEYTE

This certification is issued to JOVIE MARIEL L. DEGORIO upon his/her request.


SARAH L. BERNALES
MUNICIPAL CIVIL REGISTRAR

Verified by:


FRANCIS A. DACERA
ADMIN. AIDE V (PROCESS SERVER)

Amount paid : 100.00
O.R. Number : 9238991
Date Paid : 6th June 2016

Note: A mark, erasure or alteration of any entry invalidates this certification.