



REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out, completely, accurately and legibly in ink or typewriter)

PROVINCE Leyte

LOCAL CIVIL REGISTRY NO. 88-2898

CITY/MUNICIPALITY Baybay

1. NAME (First) <u>Homer</u> (Middle) <u>Lois</u> (Last) <u>Napoles</u>	3. DATE OF BIRTH (Day) <u>27</u> (Month) <u>Nov.</u> (Year) <u>1988</u>
2. SEX (Place 'X' on appropriate answer) ☒ Male ☐ Female	4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/Barangay) (City/Municipality) (Province) <u>Baybay Provincial Hospital Baybay, Leyte</u>
5a. TYPE OF BIRTH (Place 'X' on appropriate answer) ☒ Single ☐ Twin ☐ Three or more	5b. IF MULTIPLE BIRTH, CHILD WAS ☐ First ☐ Second ☐ Third, 4th, etc.
6. MAIDEN NAME (First) <u>Lydia</u> (Middle) <u>T.</u> (Last) <u>Puerin</u>	7. NATIONALITY <u>FIL.</u>
8. NAME (First) <u>Henry</u> (Middle) <u>M.</u> (Last) <u>Napoles</u>	9. NATIONALITY <u>FIL.</u>
10. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back) <u>May 10, 1988 Baybay, Leyte</u>	11. RELIGION <u>RC</u>
12. CERTIFICATE OF ATTENDANT AT BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>5:15 a.m.</u> on the date stated above.	
Signature <u>[Signature]</u> Name in print <u>Loreto Dunguing M.</u> Title or position <u>Resident Physician</u>	Address <u>WLPB Baybay, Leyte</u> Date <u>11/27/88</u>
13. INFORMANT Signature <u>[Signature]</u> Name in print <u>Lydia P. Napoles</u> Relationship to child <u>Mother</u>	
Address <u>Brgy. Gabas Baybay, Leyte</u> Date <u>11/27/88</u>	
14. PREPARED BY Signature <u>[Signature]</u> Name in print <u>Zaida C. Ciano</u> Title or position <u>MC Attendant</u> Date <u>11/27/88</u>	
15. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR Signature <u>[Signature]</u> Name in print <u>Noel V. Manabagnag</u> Title or position <u>LCR</u> Date <u>11/28/88</u>	

16. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

17. DATE WHEN INFORMATION WAS SUPPLIED

(Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar)

PROVINCE Leyte

CITY/MUNICIPALITY Baybay

Local Civil Registry No. 88-2898

Registration Status 15

Child	17. Weight at birth (In grams) <u>3,100</u> <u>16</u>	18. Birth Order of Child (Ex. first, second, etc.) <u>01</u> <u>20</u>
	19a. Total Number of Children Born Alive <u>01</u> <u>22</u> <u>1</u>	19b. How many children are now living including this birth? <u>01</u> <u>24</u> <u>1</u>
	19c. How many children were born alive but are now dead? <u>00</u> <u>28</u> <u>0</u>	
	20. Usual Occupation <u>Student</u> <u>28</u>	21. Age at the time of this Birth <u>23</u> <u>31</u>
	22. Usual Residence (Barangay) <u>B. Gabas</u> (City/Municipality) <u>Baybay, Leyte</u> (Province) <u>Leyte</u>	23. <u>2708</u>
Mother	24. Usual Occupation <u>None</u> <u>38</u>	24. Age at the time of this Birth <u>27</u> <u>41</u>
	25. Attendant at Birth (Place 'X' on appropriate answer) ☒ Physician ☐ Nurse ☐ Midwife ☐ Healer ☐ Others	
Father	Sex <u>1</u> <u>44</u>	Place of Birth <u>1</u> <u>51</u>
	Date of Birth <u>27/11/88</u> <u>45</u>	Mother's Nationality <u>1</u> <u>56</u>
Father's Nationality <u>1</u> <u>57</u>		
NAME OF CHILD First <u>HOMER</u> Middle <u>LOIS</u> Last <u>NAPOLES</u>		

01612-EC-402RDC-00159-BI001

BEST POSSIBLE IMAGE



T402016124020015905312004001

[03708-A88WT05-7]

Carmelita N. ERICTA

CARMELITA N. ERICTA
Administrator and Civil Registrar General
National Statistics Office

LB600046013