

Republic of the Philippines									
OFFICE OF THE CIVIL REGISTRAR GENERAL									
CERTIFICATE OF LIVE BIRTH									
Province <u>LANAO DEL SUR</u>						Registry No. 235345			
City/Municipality <u>PIAGAPO</u>									
CHILD	1. NAME			(First)	(Middle)	(Last)			
	Jahid			Hasan			Rocky		
	2. SEX		(Male/Female)	3. DATE OF BIRTH			29 March 2023		
	Male								
	4. PLACE OF BIRTH			(Name of Hospital/Clinic/Institution/ House No.,St.,Barangay)	(City/Municipality)	(Province)			
BBD			Butig			Lanao Del Sur			
5a. TYPE OF BIRTH		5b. IF MULTIPLE BIRTH,		5c. BIRTH ORDER		6. WEIGHT AT BIRTH			
(Single, Twin, Triplet, etc)		CHILD WAS		(Order of this birth to previous live births including fetal death)					
SINGLE		(First, Second, Third etc.)		FIRST		333 (grams)			
MOTHER	7. MAIDEN NAME			(First)	(Middle)	(Last)			
	A dicta ipsa volupt			Ducimus praesentium			Ducimus praesentium		
	8. CITIZENSHIP			Andorran		9. RELIGION		Atheism	
	10a. Total number of children born alive		10b. No. of children still living including this birth		10c. No. of children born alive but are now dead		11. OCCUPATION		12. AGE at the time of this birth
	15		12		76		NON ID OFFICIA VOLUP		(completed years) 81
13. RESIDENCE			(House No.,St.,Barangay)	(City/Municipality)	(Province)	(Country)			
Omnis magnam perferere			Shariff Aguak		Maguindanao		Philippines		
FATHER	14. NAME			(First)	(Middle)	(Last)			
	Amet Nam adipisci q			Iure voluptate place			Porro odit nulla lab		
	15. CITIZENSHIP		16. RELIGION		17. OCCUPATION		18. AGE at the time of this birth		
	VENEZUELAN		JUDAISM		VENIAM ASPERNATUR E		(completed years)		
19. RESIDENCE			(House No.,St.,Barangay)	(City/Municipality)	(Province)	(Country)			
Commodo quae ea quib			Butig		Lanao Del Sur		Philippines		
MARRIAGE OF PARENTS									
20a. DATE				20b. PLACE		(City/Municipality)	(Province)	(Country)	
				Shariff Aguak		Maguindanao		Philippines	
21a. ATTENDANT									
1 Physician _____ 2 Nurse <u>X</u> 3 Midwife 4 Hilot (Traditional Birth Attendant) _____ 3 Hilot _____ 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 2:39 PM on the date of specified above.									
Signature _____					Address <u>KAPASIA, GAZIPUR</u>				
Name in Print <u>MANZARUL ISLAM</u>									
Title or Position <u>KAPASIA, GAZIPUR</u>					Date <u>29 MARCH 2023</u>				
22. CERTIFICATION OF INFORMANT					23. PREPARED BY				
I hereby certify that all information supplied are true and correct to my own knowledge and belief.									
Signature _____					Signature _____				
Name in Print <u>OCCAECAT TENETUR ENI</u>					Name in Print <u>HANIFA HADJI YASSER</u>				
Relationship to the Child <u>MYSELF</u>					Title or Position <u>CLERK 1</u>				
Address <u>ACCUSANTIUM NON QUI</u>					Date _____				
Date <u>29 MARCH 2023</u>									
24. RECEIVED BY					25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR				
Signature _____					Signature _____				
Name in Print <u>NORaida CORNELL</u>					Name in Print <u>NANAYAON MANALOCON</u>				
Title or Position <u>CLERK 2</u>					Title or Position <u>MUNICIPAL CIVIL REGISTRAR</u>				
Date _____					Date _____				
									

AFFIDAVIT OF ACKNOWLEDGEMENT/ADMISSION OF PATERNITY

(For births before 3 august 1988)

(For births on or after 3 august 1988)

I/We _____ and _____ of legal age, am/are the natural mother and/or father of _____, who was born on _____ at _____

I am / We are executing this affidavit to attest to the truthfulness of the foregoing statements and for purposes of acknowledging my/our child.

(Signature Over Printed Name of Father) (Signature Over Printed Name of Mother)

SUBSCRIBED AND SWORN to before me this _____ day of _____, _____ by _____ and _____, 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 BIRTH

(To be accomplished by the hospital/clinic administrator, father, mother or gurdian or the person himself if 18 years old or over.)

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

1. That I am the applicant for the delayed registration of :
☐ my birth in _____ on _____
☐ the birth _____ who was born in _____ On _____.
2. That I/he/she was attended at birth by _____ who resides at _____
3. That I/he/she is a citizen of _____.
4. That my/his/her parents were
☐ married on _____ at _____
☐ not married but I/he/she was acknowledged/not acknowledged by my/his/her father whose name is _____
5. That the reason for the delay in registering my/his/her birth was _____.
6. (For the applicant only) That I am married to _____.
(If the applicant is other than the document owner) That I am the __ of the said person.
7. 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 CTV/valid ID _____ issued on _____ at _____

Signature of the Administering Officer MUNICIPAL CIVIL REGISTRAR

NANAYAON MANALOCON PIAGAPO, LANA O DEL SUR

Name in Print Address



IN THE NAME OF ALLAH
THE MERCHIFUL, THE COMPASSIONATE

Municipal Form No. 102 (Revised August 2017, attachment)		(To be accomplished in quadruplicate using black ink)	
Province <u>LANAO DEL SUR</u>		Registry No. <u>235345</u>	
City/Municipality <u>PIAGAPO</u>			
1. NAME OF CHILD		(First) Jahid	(Middle) Hasan
		(Last) Rocky	
2. DATE OF BIRTH			
Gregorian Calendar		29 March 2023	
Hijrah Calendar		<u>07 09 1444</u>	
3. ETHNICITY OF THE FATHER		4. ETHNICITY OF THE MOTHER	
5. INFORMANT			
Signature _____		Address <u>ACCUSANTIUM NON QUI</u>	
Name in print <u>OCCAECAT TENETUR ENI</u>		_____	
Relationship to the child <u>MYSELF</u>		Date <u>29 MARCH 2023</u>	