

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

CERTIFICATE OF LIVE BIRTH

Province		LANAO DEL SUR		Registry No.																									
City/Municipality		PIAGAPO		2022 - 1989																									
CHILD	1. NAME (First) (Middle) (Last)																												
	SALIHA MAMANGCAO HADJI AZIS																												
	2. SEX (Male / Female)		3. DATE OF BIRTH (Day) (Month) (Year)																										
	FEMALE		11 MARCH 2005																										
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) (City/Municipality) (Province)																												
KATUMBACAN PIAGAPO LANAO DEL SUR																													
MOTHER	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.)		5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.)		5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.)																								
	SINGLE		NOT APPLICABLE		FIRST																								
	6. WEIGHT AT BIRTH		3010 grams																										
	7. MAIDEN NAME (First) (Middle) (Last)																												
	NORASIA MAMANG MAMANGCAO																												
8. CITIZENSHIP		9. RELIGION/RELIGIOUS SECT																											
FILIPINO		ISLAM																											
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 (completed years)																								
01		01	00	HOUSEKEEPER																									
13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)																													
KATUMBACAN PIAGAPO LANAO DEL SUR PHILIPPINES																													
FATHER	14. NAME (First) (Middle) (Last)																												
	JALALODIN BAGUAN HADJI AZIS																												
	15. CITIZENSHIP		16. RELIGION/RELIGIOUS SECT	17. OCCUPATION	18. AGE at the time of this birth (completed years)																								
	FILIPINO		ISLAM																										
19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)																													
KATUMBACAN PIAGAPO LANAO DEL SUR PHILIPPINES																													
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)																													
20a. DATE (Month) (Day) (Year)		20b. PLACE (City / Municipality) (Province) (Country)																											
March 24, 2004		PIAGAPO LANAO DEL SUR PHILIPPINES																											
21a. ATTENDANT																													
1 Physician 2 Nurse 3 Midwife X 4 Hilot (Traditional Birth Attendant) 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 _____ am/pm on the date of birth specified above.																													
Signature		Address																											
(Signature)		PIAGAPO, LANAO DEL SUR																											
Name in Print		RAULA MANAGSA																											
Title or Position		HILOT																											
Date		NOV 08 2022																											
22. CERTIFICATION OF INFORMANT																													
I hereby certify that all information supplied are true and correct to my own knowledge and belief.																													
Signature		23. PREPARED BY																											
(Signature)		(Signature)																											
Name in Print		Name in Print																											
KHALIL C. PALAGAWAD		NORAIDA A. CORNELL																											
Relationship to the Child		Title or Position																											
APPLICANT		CLERK II																											
Address		Date																											
KATUMBACAN		NOV 08 2022																											
Date		NOV 08 2022																											
24. RECEIVED BY																													
Signature		25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR																											
(Signature)		(Signature)																											
Name in Print		Name in Print																											
NORAIDA A. CORNELL		NANAYAON B. MANALOCON																											
Title or Position		Title or Position																											
CLERK II		MUNICIPAL CIVIL REGISTRAR																											
Date		Date																											
NOV 08 2022		NOV 08 2022																											
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)																													
LATE REGISTRATION																													
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR																													
8	9	11	13	15	16	17	19																						
0	1	0	5	5	1	2	6	0	8	0	3	6	2	1	0	1	0	5				6	0	8	0	3	6	2	1

AFFIDAVIT OF ACKNOWLEDGMENT/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 guardian or the person himself if 18 years old or over.)

KHALIL C. PALAGAWAD, of legal age, single/married/divorced/widow/widower, with
residence and postal address at **PIAGAPO, LANA O DEL SUR**

_____ 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 of **SALIHA MAMANGCAO HADJI AZIS** who was born in **PIAGAPO, LANA O DEL SUR**
on **MARCH 11, 2005**

2. That I/he/she was attended at birth by **RAULA MANAGSA** who resides at
PIAGAPO, LANA O DEL SUR

3. That I am/he/she is a citizen of **PHILIPPINES**

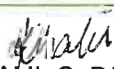
4. That my/his/her parents were ☒ married on **MARCH 24, 2004** at **PIAGAPO, LANA O DEL SUR**
☐ not married but I/he/she was acknowledged/not acknowledged by my/his/her
father whose name is _____

5. That the reason for the delay in registering my/his/her birth was
DUE TO NEGLIGENCE

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.

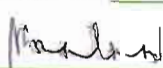
7. That I am executing this affidavit to attest to the truthfulness of the foregoing statements for all legal intents and purposes.

In truth whereof, I have affixed my signature below this _____ day of _____
at **PIAGAPO, LANA O DEL SUR**, Philippines.


KHALIL C. PALAGAWAD

(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

MUNICIPAL CIVIL REGISTRAR

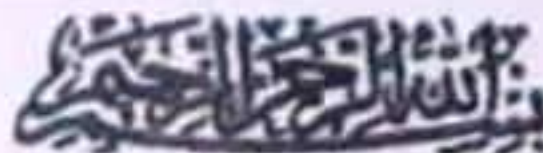
Position / Title / Designation

NANAYAON B. MANALOCON

Name in Print

PIAGAPO, LANA O DEL SUR

Address



IN THE NAME OF ALLAH
THE MERCIFUL THE COMPASSIONATE

Municipal Form No. 102

(Revised January 2007, attachment)

(To be accomplished in quadruplicate using black ink)

Province **LANAO DEL NORTE**

Registry No.

City/Municipality **PANTAO RAGAT**

2013-199

1. NAME OF CHILD

(First)

(Middle)

(Last)

ANSA RODING

MANGOTARA

POLAYAGAN

2. DATE OF BIRTH

(Day)

(Month)

(Year)

Gregorian Calendar

01

MAY

1988

Hijrah Calendar

3. ETHNICITY OF THE FATHER

MARANA O

4. ETHNICITY OF THE MOTHER

MARANA O

5. INFORMANT

Signature

Address

CABASAGAN, PANTAO RAGAT

Name in Print

LILENG B. MANGOTARA

LANAO DEL NORTE

Relationship to the Child

SON

Date

JUNE 28, 2013





Municipal Form No. 102 (IP Form No. 1)
(Revised January 2007, attachment)

(To be accomplished in quadruplicate using black ink)

Province LANAO DEL SUR

City/Municipality PIAGAPO

Registry No.

1. NAME OF CHILD

(First)

(Middle)

(Last)

2. NAME OF FATHER

(First)

(Middle)

(Last)

3. MAIDEN NAME OF MOTHER

(First)

(Middle)

(Last)

4. DATE OF BIRTH

(Day)

(Month)

(Year)

5. ETHNICITY OF THE FATHER

6. ETHNICITY OF THE MOTHER

7. INFORMANT

Signature

Address

Name in Print

Relationship to the Child

Date