

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL

**CERTIFICATE OF LIVE BIRTH**

Province	CAGAYAN			Registry No.	2014-1423																																																																	
City/Municipality	BAGGAO				1423																																																																	
C H I L D	1. NAME (First) MARIA (Middle) LAGISMA (Last) BATARA																																																																					
	2. SEX (Male / Female) FEMALE		3. DATE OF BIRTH (Day) 15 (Month) JANUARY (Year) 1910																																																																			
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) MASICAL			(City/Municipality) BAGGAO (Province) CAGAYAN																																																																		
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) SINGLE		5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) NOT APPLICABLE		5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.) FIRST	6. WEIGHT AT BIRTH 3100 grams																																																																
M O T H E R	7. MAIDEN NAME PAULA (Middle) CAPALA (Last) LAGISMA																																																																					
	8. CITIZENSHIP FILIPINO			9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC																																																																		
	10a. Total number of children born alive 1	10b. No. of children still living including this birth 1	10c. No. of children born alive but are now dead 0	11. OCCUPATION HOUSEKEEPER, OWN HOME		12. AGE at the time of this birth (completed years)																																																																
	13. RESIDENCE (House No., St., Barangay) MASICAL		(City/Municipality) BAGGAO (Province) CAGAYAN (Country) PHILIPPINES																																																																			
F A T H E R	14. NAME (First) CANUTO (Middle) DULDULAO (Last) BATARA																																																																					
	15. CITIZENSHIP FILIPINO		16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC		17. OCCUPATION RICE FARMER	18. AGE at the time of this birth (completed years)																																																																
	19. RESIDENCE (House No., St., Barangay) MASICAL		(City/Municipality) BAGGAO (Province) CAGAYAN (Country) PHILIPPINES																																																																			
	MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)																																																																					
20a. DATE (Month) (Day) (Year)	DON'T KNOW		20b. PLACE (City / Municipality)	(Province)	(Country)																																																																	
21a. ATTENDANT																																																																						
<input type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" 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 _____ am/pm on the date of birth specified above.																																																																						
Signature _____ Address _____																																																																						
Name in Print _____																																																																						
Title or Position _____ Date _____																																																																						
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 _____ Relationship to the Child _____ Address _____ Date _____				23. PREPARED BY Signature _____ Name in Print _____ Title or Position _____ Date _____																																																																		
24. RECEIVED BY Signature _____ Name in Print _____ Title or Position _____ Date _____				25. REGISTERED BY THE CIVIL REGISTRAR Signature _____ Name in Print _____ Title or Position _____ Date _____																																																																		
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only) DELAYED REGISTRATION BIRTH PRIOR TO 1931 BAGGAO, CAGAYAN																																																																						
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR																																																																						
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**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)

Community Tax Cert. No. \_\_\_\_\_ 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.)

I, CARLITO CASAY DOMINGO, of legal age, single/married/divorced/widow/widower, with residence and postal address at MASICAL, BAGGAO, CAGAYAN

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 CAGAYAN on \_\_\_\_\_

the birth of MARIA LAGISMA BATARA who was born in MASICAL, BAGGAO, CAGAYAN on JANUARY 15, 1910

2. That I/he/she was attended at birth by HILOT who resides at WHO IS ALREADY DEAD3. That I am/he/she is a citizen of PHILIPPINES

4. That my/his/her parents were

married on DON'T KNOW at \_\_\_\_\_

not married but I/he/she was acknowledged/not acknowledged by my/his/her father whose name is HILOT

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

6. (For the applicant only) That I am married to \_\_\_\_\_

(If the applicant is other than the document owner) That I am the GRANDSON 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

at BAGGAO, CAGAYAN13th day of NOVEMBER 2014

, Philippines.

CARLITO CASAY DOMINGO

(Signature Over Printed Name of Affiant)

**SUBSCRIBED AND SWORN** to before me this 13th day of NOVEMBER 2014 at BAGGAO, CAGAYAN

25571739 issued on JANUARY 8, 2014, Philippines, affiant who exhibited to me his Community Tax Cert. at BAGGAO, CAGAYAN

Signature of the Administering Officer

ROLAND P. BANGAYAN

Name in Print

**MUNICIPAL CIVIL REGISTRAR**

Position / Title / Designation

BAGGAO, CAGAYAN

Address



Republic of the Philippines  
NATIONAL STATISTICS OFFICE  
Manila

OFFICE OF THE CIVIL REGISTRAR GENERAL

November 04, 2014

TO WHOM IT MAY CONCERN:

We certify that we do not have any record of birth of:

Name	: MARIA LAGISMA BATARA
Date of Birth	: January 15, 1910
Place of Birth	: Baggao, Cagayan
Father	: CANUTO DULDULAO BATARA
Mother	: PAULA CAPALA LAGISMA

Further verification may be made from the **Local Civil Registry Office of Baggao, Cagayan**. If available, the document may be requested for endorsement to the Office of the Civil Registrar General (OCRG). Otherwise, any interested party may apply for delayed registration.

Issued upon the request of **CARLITO DOMINGO** for General Purposes.

*Lisa Grace S. Bersales*  
LISA GRACE S. BERSALES, Ph.D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

Documentary  
Stamp Tax Paid

**Note:** This certification is not valid if it contains erasures or alterations.

05421-R0-103VCD-00013-BI002

22/B//BATARA/MARIA//LAGISMA/PAULA//////////OFF



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