

DEPARTMENT OF FOREIGN AFFAIRS
KAGAWARAN NG UGNAYANG PANLABAS



S.N. 20A- 0755650

APOSTILLE

(Convention de La Haye du 5 Octobre 1961)

1. Country: Philippines

This public document

2. has been signed by Claire Dennis S. Mapa
3. acting in the capacity of National Statistician and Civil Registrar General
4. bears the seal/stamp of Philippine Statistics Authority

Certified

5. at Manila
6. the 25th day of May 2022
7. by RENATO D. BERNARDO
8. No. 20A- 0755650
9. Seal/Stamp:

10. Signature:


Authentication Officer

Birth Certificate
ADRIAN JAMES DAQUIOAG CAGGAUUAAN
*****NOTHING FOLLOWS*****



KEYCODE: 05204495

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(Copy for OCRG)

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
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 <u>NCR</u>		Registry No. <u>2014-29779</u>			
City/Municipality <u>QUEZON CITY</u>					
CHILD	1. NAME (First) (Middle) (Last) <u>ADRIAN JAMES DAQUIOAG CAGGAUJUAN</u>		FOR OCRG USE ONLY: Population Reference No.		
	2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>5 MAY 2014</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) (House No. Street, Barangay) <u>COMMONWEALTH HOSPITAL AND MEDICAL CENTER NEOPOLITAN BUSINESS PARK, REGALADO HIGHWAY NOVALICHES, QUEZON CITY</u>		41		
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify		42
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>FIRST</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3.22 kg</u> grams		43
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>JOCELYN ALVAREZ DAQUIOAG</u>		44 45 <u>060574</u>		
	7. CITIZENSHIP <u>FILIPINO</u>		8. RELIGION <u>CHRISTIAN</u>		46
	9a. Total number of children born alive:	b. No. of children still living including this birth:	c. No. of children born alive but are now dead:		47
	10. OCCUPATION <u>EMPLOYEE</u>		11. Age at the time of this birth: <u>33</u> years		48
	12. RESIDENCE (House No. Street, Barangay) (City/Municipality) (Province) <u># 3 CUPSILOK STREET, OLD BALARA, QUEZON CITY</u>		49 50 <u>013220</u>		
FATHER	13. NAME (First) (Middle) (Last) <u>ALFIE MIRANDA CAGGAUJUAN</u>		51 52 <u>001089</u>		
	14. CITIZENSHIP <u>FILIPINO</u>		15. RELIGION <u>CHRISTIAN</u>		53
	16. OCCUPATION <u>NURSE</u>		17. Age at the time of this birth: <u>31</u> years		54
	18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back) <u>CHURCH OF CHRIST, CUBAO, QUEZON CITY</u> <u>DECEMBER 18, 2011</u>				
	19a. ATTENDANT <input type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Hilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)		55 56 <u>093033</u>		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>2:56 AM</u> o'clock am/pm on the date stated above.		57 58 <u>03409</u>			
Signature <u>DESIREE ANNE VALLES, MD</u> Address <u>COMMONWEALTH HOSPITAL AND MEDICAL CENTER, QUEZON CITY</u> Name in Print <u>OB-GYNE CONSULTANT</u> Date <u>MAY 06, 2014</u>		59 60 <u>001089</u>			
Signature <u>JOCELYN D. CAGGAUJUAN</u> Address <u>SAME AS ABOVE</u> Name in Print <u>MOTHER</u> Date <u>MAY 06, 2014</u>		61 62 <u>223137</u>			
Signature <u>SHARA S. DELA CRUZ</u> Address _____ Name in Print <u>MEDICAL RECORDS STAFF</u> Date _____ Title or Position _____ Date _____		63 64 <u>12142011</u> <u>0003409</u>			
Signature _____ Address _____ Name in Print _____ Date _____ Title or Position _____ Date _____		65 66 _____			

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CLAIRE DENNIS S. MAPA, Ph. D.
 National Statistician and Civil Registrar General
 Philippine Statistics Authority

