

CIVIL REGISTRY FORM NO. 1A

(BIRTH AVAILABLE)

Date: _____

Page Number: _____

Book Number: _____

Registry Number: _____

Date of Registration: _____

Name of Child: _____

Sex: _____

Date of Birth: _____

Place of Birth: _____

Name of Father: _____

Citizenship of Mother: _____

Date of Marriage of Parents: _____

Place of Marriage of Parents: _____

Amount Paid: _____

O.R. Number: _____

Date Paid: _____