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| **BIRTH – Late Registration**  **COUNTER**  **19** |
| **DATE:** |
| **NAME:** |
| **ADDRESS:** |
| **CONTACT NO:** |
| **REMARKS:**    Insufficient supporting documents  Inconsistent supporting documents  Needs Affidavit of Discrepancy  Needs Affidavit of Guardianship  Needs Admission of Paternity  Needs to Register A.U.S.F  For submission of additional documents  Personal Appearance Needed  [ ] Father [ ] Mother [ ] Child [ ] Subject Person |
| **OTHERS:** |
| **ATTENDING STAFF:** |

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