



(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>Lanao del Norte</u>			Registry No. <u>2000-6105</u>			
City/Municipality <u>Iligan City</u>						
CHILD	1. NAME (First) (Middle) (Last) <u>RALPH MARI ISADA VALENTE</u>		For OCRG USE ONLY: Population Reference No. <u>3000</u>			
	2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>17 August 2000</u>			
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Zona Acuaria, Suarez Iligan City Lanao del Norte</u>			TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR		
	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		41 <u>6115</u>	
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>First</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>2722</u> grams		48 <input type="checkbox"/>	
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>MARIA GRWA NANCIO ISADA</u>		49 <input type="checkbox"/> 50 <u>6</u>			
	7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Roman Catholic</u>			
	9a. Total number of children born alive: <u>1</u>		b. No. of children still living including this birth: <u>1</u>		56 <input type="checkbox"/>	
	10. OCCUPATION <u>Housekeeper</u>		11. Age at the time of this birth: <u>19</u> years		61 <input type="checkbox"/>	
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Zona Acuaria, Suarez Iligan City Lanao del Norte</u>			62 <input type="checkbox"/> 64 <u>610720</u>		
FATHER	13. NAME (First) (Middle) (Last) <u>ERENITO VALERAMA VALENTE</u>		63 <input type="checkbox"/> 66 <input type="checkbox"/>			
	14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>			
	16. OCCUPATION <u>Businessman</u>		17. Age at the time of this birth: <u>27</u> years		69 <input type="checkbox"/> 72 <input type="checkbox"/> 76 <input type="checkbox"/>	
	18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Mar 18, 2000 Iligan City</u>			78 <input type="checkbox"/> 79 <input type="checkbox"/>		
	19a. ATTENDANT <input type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input checked="" type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Hilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)		81 <input type="checkbox"/>			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>5:00 pm</u> o'clock am/pm on the date stated above.						
Signature: <u>[Signature]</u> Name in Print: <u>Charlie P. Yuning, III</u> Title or Position: <u>Midwife III</u>		Address: <u>Suarez, Iligan City</u> Date: <u>August 25, 2000</u>				
20. INFORMANT Signature: <u>[Signature]</u> Name in Print: <u>ERENITO V. VALENTE</u> Relationship to the child: <u>Father</u>		Address: <u>Suarez, Iligan City</u> Date: <u>August 25, 2000</u>				
21. PREPARED BY Signature: <u>[Signature]</u> Name in Print: <u>Eriberto B. Pacho</u> Title or Position: <u>Asst. Reg. Officer I</u> Date: <u>August 25, 2000</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature: <u>[Signature]</u> Name in Print: <u>ERENITO VALENTE</u> Title or Position: <u>REGISTRY ENCLERK II</u> Date: <u>AUG 25 2000</u>				

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BEST POSSIBLE IMAGE



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

