



(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 <b>CERTIFICATE OF LIVE BIRTH</b> (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>Cebu</u>		City/Municipality <u>Cebu City</u>		Registry No. <u>94-7625</u>	
1. NAME (First) <u>Jely Ann</u> (Middle) <u>Ave</u> (Last) <u>Rondina</u>		2. SEX <u>X</u> 1 Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) <u>10</u> (month) <u>April</u> (year) <u>1994</u>	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) <u>Vicente Sotto Memorial Medical Center Cebu City Cebu</u>					
5a. TYPE OF BIRTH <u>X</u> 1 Single <u>X</u> 2 Twin <u>  </u> 3 Triplet, etc.		5b. IF MULTIPLE BIRTH, CHILD WAS <u>  </u> 1. First <u>  </u> 2. Second <u>  </u> 3. Others, Specify <u>  </u>			
6. MAIDEN NAME (First) <u>Angeline</u> (Middle) <u>Quico</u> (Last) <u>Ave</u>		7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Roman Catholic</u>	
9a. Total number of children born alive: <u>3</u>		9b. No. of children still living including this birth: <u>3</u>		9c. No. of children born alive but are now dead: <u>0</u>	
10. OCCUPATION <u>N. A.</u>		11. Age at the time of this birth: <u>29</u> years			
12. RESIDENCE (House No., Street, Barangay) <u>Martirez St.</u> (City/Municipality) <u>Cebu City</u> (Province) <u>Cebu</u>		13. NAME (First) <u>Joselito</u> (Middle) <u>Bace</u> (Last) <u>Rondina</u>			
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>			
16. OCCUPATION <u>Factory worker</u>		17. Age at the time of this birth: <u>29</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>October 22, 1989 Mandaue City</u>					
19a. ATTENDANT <u>X</u> 1 Physician <u>  </u> 2 Nurse <u>  </u> 3 Midwife <u>  </u> 4 Hilot (Traditional Midwife) <u>  </u> 5 Others (Specify) <u>  </u>					
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>8:40 A. M.</u> o'clock am/pm on the date stated above.					
Signature <u>Dr. Maria Teresa Datan</u> Name in Print <u>Resident Physician</u> Title or Position <u>  </u>		Address <u>VSMC Cebu City</u> Date <u>APRIL 10, 1994</u>		41 <u>9407405</u>	
20. INFORMANT Signature <u>Angeline Rondina</u> Name in Print <u>Angeline Rondina</u> Relationship to the child <u>Mother</u>		Address <u>Martirez St. Cebu City</u> Date <u>April 19, 1994</u>		48 <u>1</u>	
21. PREPARED BY Signature <u>Rowena Rachelle A. Ver-gara</u> Name in Print <u>Rowena Rachelle A. Ver-gara</u> Title or Position <u>Nurse</u> Date <u>April 10, 1994</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>NIDA A. NUNEZ</u> Name in Print <u>NIDA A. NUNEZ</u> Title or Position <u>CLERK</u> Date <u>APR 20 1994</u>		48 <u>1</u>	
41 <u>9407405</u> 48 <u>1</u> 49 <u>2</u> 50 <u>700494</u> 56 <u>22178</u> 61 <u>1</u> 62 <u>03</u> 64 <u>2090</u> 66 <u>1</u> 68 <u>1</u> 70 <u>03</u> 72 <u>03</u> 74 <u>00</u> 76 <u>220</u> 78 <u>29</u> 81 <u>22178</u> 86 <u>1</u> 87 <u>1</u> 88 <u>949</u> 91 <u>29</u> 93 <u>1</u> 94 <u>1</u> 2600 102289 2220 042940					

*Carmelita N. Erica*  
CARMELITA N. ERICIA