

Vivo V20 - yuki.joyes  
Jul 09, 2021, 20:59

Municipal Form No. 102  
(Revised August 2016)

(To be accomplished in quadruplicate using black ink)

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL  
**CERTIFICATE OF LIVE BIRTH**

Province <b>CEBU</b>		Registry No.	
City/Municipality <b>MANDAUE CITY</b>			
1. NAME (First) <b>LIAM EDALB</b> (Middle) (Last) <b>PALANG</b>		2. SEX (Male / Female) <b>MALE</b>	
3. DATE OF BIRTH (Day) <b>22</b> (Month) <b>NOVEMBER</b> (Year) <b>2019</b>		4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) <b>PAANAKAN SA MANDAUE, TIPOLO MANDAUE CITY CEBU</b>	
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) <b>SINGLE</b>		5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) <b>NOT APPLICABLE</b>	
5c. BIRTH ORDER (Order of this birth to proceed in birth recording table-death) (First, Second, Third, etc.) <b>FOURTH</b>		6. WEIGHT AT BIRTH <b>3100</b> grams	
7. MAIDEN NAME (First) <b>DAWN</b> (Middle) (Last) <b>PALANG</b>		8. CITIZENSHIP <b>FILIPINO</b>	
9. RELIGION/RELIGIOUS SECT <b>ROMAN CATHOLIC</b>		10. AGE at the time of birth (completed years) <b>26</b>	
11. OCCUPATION <b>CALL CENTER ASSISTANT/REPRESENTATIVE</b>		12. RESIDENCE (House No., St., Barangay) <b>SUBANGDAKU</b> (City/Municipality) <b>MANDAUE CITY</b> (Province) <b>CEBU</b> (Country) <b>PHILIPPINES</b>	
13. NAME (First) (Middle) (Last)		14. CITIZENSHIP	
15. RELIGION/RELIGIOUS SECT		16. OCCUPATION	
17. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)		18. AGE at the time of birth (completed years)	

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)  
20a. DATE (Month) (Day) (Year) 20b. PLACE (City / Municipality) (Province) (Country)

11a. ATTENDANT  
1 Physician 2 Nurse  3 Midwife 4 Hilot (Traditional Birth Attendant) 5 Others (Specify)  
11b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.)  
I hereby certify that I attended the birth of the child who was born alive at **05:16 PM** am/pm on the date of birth specified as

Signature *[Signature]* Address **TIPOLO MANDAUE CITY**  
Name in Print **PAUL JOHN M. DOSDOS**  
Title or Position **RM** Date **NOVEMBER 23, 2019**

CERTIFICATION OF INFORMANT  
I hereby certify that all information supplied are true and correct to my own knowledge and belief.  
Signature *[Signature]* Signature *[Signature]*  
Name in Print **DAWN PALANG** Name in Print **SARAH JANE S. BIBAT**  
Relationship to the Child **MOTHER** Title or Position **RM**  
Address **SUBANGDAKU MANDAUE CITY** Date **NOVEMBER 23, 2019**

RECEIVED BY  
Signature  
Name in Print  
Title or Position  
Date  
25. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature  
Name in Print  
Title or Position  
Date  
*[Signature]*  
**Sarah Jane Bibat**

**SARAH J. PALANG**  
Employee Signature Over Printed Name