



Municipal Form No. 102  
(Revised 1983)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES  
**CERTIFICATE OF LIVE BIRTH**  
(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE Aguano del Norte LOCAL CIVIL REGISTRY NO. 88-293  
CITY/MUNICIPALITY Rebe

1. Name (First) RICHLELLE (Middle) APAT (Last) LLOREN

2. SEX (Place 'X' on appropriate answer)  
1 Male  2 Female

3. DATE OF BIRTH (Day) (Month) (Year)  
10 March 1958

4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) (City/Municipality) (Province)  
Rebe Rebe Aguano del Norte

5a. TYPE OF BIRTH (Place 'X' on appropriate answer)  
 1 Single  2 Twin  3 Three or more

5b. IF MULTIPLE BIRTH, CHILD WAS  
1 First  2 Second  3 Third, 4th, etc

6. MAIDEN NAME (First) (Middle) (Last)  
Eloren L. Apal

7. NATIONALITY Philippine 8. RELIGION Roman Catholic

9. NAME (First) (Middle) (Last)  
Maguel P. Uron

10. NATIONALITY Philippine 11. RELIGION Roman Catholic

12. DATE & PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back)  
20 January 1974 San Fernando San Fernando

13. CERTIFICATE OF ATTENDANT AT BIRTH  
I hereby certify that I attended the birth of the child who was born alive at 7:13 o'clock a.m./p.m. on the date stated above.  
Signature [Signature] Address Rebe, L. B. Salinas, Ag. N.  
Name in print HERMINA M. SALINAS Date 10 March 1958  
Title or position R.N.

14. INFORMANT  
Signature [Signature] Address Rebe, L. B. Salinas, Ag. N.  
Name in print HERMINA M. SALINAS Date \_\_\_\_\_  
Relation to child mother

15a. PREPARED BY  
Signature [Signature] b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR  
Name in print HERMINA M. SALINAS Signature [Signature]  
Title or position R.N. Name in print [Name]  
Date \_\_\_\_\_ Title or position [Title]

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED 70

(Important: Informant should also provide information for Items 17-25 The code boxes are to be filled out at the Office of the Local Civil Registrar)

Local Civil Registry No. 8800293 Registration Status 1  
8 15

PROVINCE Aguano del Norte CITY/MUNICIPALITY Rebe

17. Weight at Birth (In grams) 95 lb. 3777 18. Birth Order of Child Ex. first, second, etc. SM. 08  
18 20

19a. Total Number of Children Born Alive 7 22 07 b. How many children are now living including this birth? 6 24 06 c. How many children were born alive but are now dead? 2 28 02

20. Usual Occupation Hukokero per 28 220 21. Age at the time of this Birth 35 31 35

22. Usual Residence (Barangay) (City/Municipality) Province)  
Rebe Rebe Aguano del Norte 35097 33

23. Usual Occupation Rice farmer 38 611 24. Age at the time of this birth 40 41 40

25. Attendant at Birth (Place 'X' on appropriate answer)  
.....1 Physician .....2 Nurse  3 Midwife .....4 Hilot .....5 Others 3 43

Sex 2 44 Date of Birth 000388 45 Place of Birth 35097 51 Mother's Nationality 1 56 Father's Nationality 1 57

NAME OF CHILD  
First RICHLELLE 68 M. I. A 70 Last LLOREN 71

FOR BINDING RESERVE

07307-CD-729JBR-00143-BI001

BEST POSSIBLE IMAGE



T729073077290014301032020001

ZN700510800

BReN  
03509-A88FA05-4

Documentary  
Stamp Tax Paid

*CSM*

CLAIRE DENNIS S. MAPA, Ph. D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

