



(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)
(To be accomplished in quadruplicate)
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.)

REMARKS/ANNOTATION

Province CEBU Reg. No. 2000 34364
City/Municipality CEBU CITY

1. NAME (First) (Middle) (Last)
NICOLE PRESBITERO LUMBA

2. SEX 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year)
17 NOVEMBER 2000

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
CEBU CITY MEDICAL CENTER, CEBU CITY, CEBU

5a. TYPE OF BIRTH b. IF MULTIPLE BIRTH, CHILD WAS
 1 Single 2 Twin 1 First 2 Second
 3 Triplet, etc. 3 Others, Specify

c. BIRTH ORDER (live births and fetal deaths including this delivery) d. WEIGHT AT BIRTH
6TH (first, second, third, etc.) 3330 grams

6. MAIDEN NAME (First) (Middle) (Last)
EVA AMBERTO PRESBITERO

7. CITIZENSHIP FILIPINO 8. RELIGION ROMAN CATHOLIC

9a. Total number of children born alive: 6 b. No. of children still living including this birth: 6 c. No. of children born alive but are now dead: 0

10. OCCUPATION VENDOR 11. Age at the time of this birth: 33 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
40 F. GEN. ROMAYON, CEBU CITY, CEBU

13. NAME (First) (Middle) (Last)
JOSE VALERIO LUMBA

14. CITIZENSHIP FILIPINO 15. RELIGION ROMAN CATHOLIC

16. OCCUPATION DRIVER 17. Age at the time of this birth: 35 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
June 19, 1986 - SOGOD, CEBU

19a. ATTENDANT
 1 Physician 2 Nurse 3 Midwife
 4 Hilot (Traditional Midwife) 5 Others (Specify)

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at 3:08 A.M. o'clock am/pm on the date stated above.

Signature [Signature] Address N. DALISO AVENUE,
Name in Print DOBBEY V. SAGALES CEBU CITY
Title or Position N.D. Date NOVEMBER 17, 2000

20. INFORMANT
Signature [Signature] Address 40 F. GEN. ROMAYON,
Name in Print EVA LUMBA CEBU CITY
Relationship to the child MOTHER Date NOVEMBER 17, 2000

21. PREPARED BY
Signature [Signature]
Name in Print JUSTINA D. CLAVIERO
Title or Position D.R. NURSE
Date NOVEMBER 17, 2000

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print AGNES G. BIRAO
Title or Position CLERK I
Date DEC 15 2000

FOR OFFICE USE ONLY:
Registration Reference No. 2017-BOOXH43-7
FILED UP AT THE OFFICE OF THE CIVIL REGISTRAR
[Grid of boxes for recording dates and times]

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BEST POSSIBLE IMAGE



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Documentary
Stamp Tax Paid

[Signature]
CARMELITA N. ERICTA
Administrator and Civil Registrar General
National Statistics Office

