



(Copy for OCRG)

Municipal Form No. 102 (Revised January 1999)

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 18a.)

Province: Cebu City/Municipality: Cebu City Registrar No.: 8740

1. CIVIL NAME (First) RAIZ JUDS (Middle) MORDENO (Last) CARTECIANO

2. SEX: Male 3. DATE OF BIRTH: JANUARY 1999

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
GENU PUEB CENTER & MATERNITY HOUSE INC., CEBU CITY CEBU

5a. TYPE OF BIRTH: 1 Single 5b. IF MULTIPLE BIRTH CHILD WAS: 1 First

6. BIRTH ORDER: 1st 7. WEIGHT AT BIRTH: 3500 grams

8. MAIDEN NAME (First) NORALYN (Middle) AGOS (Last) MORDENO

9. CITIZENSHIP: FILIPINO 10. RELIGION: ROMAN CATHOLIC

11. Total number of children born alive: 2 12. No. of children living including this birth: 1 13. No. of children born alive but are now dead: 0

14. OCCUPATION: HOUSEWIFE 15. Age at the time of this birth: 28 years

16. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
296 N. GONZALES COM. 7, GORDON AVENUE, CEBU CITY, CEBU

17. NAME (First) ROSELIO (Middle) SEPIO (Last) CARTECIANO

18. CITIZENSHIP: FILIPINO 19. RELIGION: ROMAN CATHOLIC

20. OCCUPATION: PAINTER 21. Age at the time of this birth: 34 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
SEPTEMBER 24, 1994 CEBU CITY

18a. ATTENDANT: 1 Physician 2 Nurse 3 Midwife 4 Traditional (Midwife) 5 Others (Specify)

19. CERTIFICATION OF BIRTH: I hereby certify that I attended the birth of the child who was born alive at 7:07 P.M. on the date stated above.

Signature: [Signature] Address: GENU PUEB CENTER & MATERNITY HOUSE INC., CEBU CITY
 Name in Print: OPHELIA BORDON Date: JANUARY 27, 1999
 Title of Position: PHYSICIAN

20. INFORMANT: Signature: [Signature] Address: 296 N. GONZALES COM., GORDON AVENUE, CEBU CITY
 Name in Print: NORALYN CARTECIANO Date: JANUARY 9, 1999
 Relationship to the child: MOTHER

21. PREPARED BY: Signature: [Signature] Address: GENU PUEB CENTER & MATERNITY HOUSE INC., CEBU CITY
 Name in Print: STANLEY TALOR Date: JANUARY 9, 1999
 Title of Position: CLERK

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR: Signature: [Signature] Address: GENU PUEB CENTER & MATERNITY HOUSE INC., CEBU CITY
 Name in Print: [Name] Date: JANUARY 9, 1999
 Title of Position: [Title]

REMARKS/ANNOTATION

TO BE FILED UP
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