



Municipal Form No. 102
Revised January 1993

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

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

A CERTIFIED MACHINE COPY FROM THE ORIGINAL

(Fill out completely, accurately and legibly. Use ink or typewriter. Place X below the appropriate answer in items 2, 5a, 5b and 19a.)

Province CEBU Registry No. 2001 12989
City/Municipality CEBU CITY

1. NAME (First) (Middle) (Last)
DAYLENE JANE DAHUMAN CABAÑGAN

2. SEX 1 Male X 2 Female 3. DATE OF BIRTH (day) (month) (year)
15 MAY 2001

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 X 1 Single 2 Twin 3 Triplet, etc. b. IF MULTIPLE BIRTH, CHILD WAS
1 First 2 Second 3 Others, Specify

c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) 2ND d. WEIGHT AT BIRTH
2720 grams

6. MAIDEN NAME (First) (Middle) (Last)
EMMA AMANGPANG DAHUMAN

7. CITIZENSHIP FILIPINO 8. RELIGION ROMAN CATHOLIC

9a. Total number of children born alive: 2 b. No. of children still living including this birth: 2 c. No. of children born alive but are now dead: 0

10. OCCUPATION NONE 11. Age at the time of this birth: 34 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
1296 - E. CAHIPA, HIPODROMO, CEBU CITY, CEBU

13. NAME (First) (Middle) (Last)
ALBERTO ALCORNIDAS CABAÑGAN

14. CITIZENSHIP FILIPINO 15. RELIGION ROMAN CATHOLIC

16. OCCUPATION SECURITY GUARD 17. 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.)
OCTOBER 11, 2000 - CEBU CITY

19a. ATTENDANT X 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 11:07 A.M. am/pm on the date stated above.

Signature Sally E. Arlan Address N. BACALSO AVENUE, CEBU CITY
Name in Print Title or Position M.D. Date MAY 15, 2001

20. INFORMANT Signature Alfredo Cabañgan Address 1296 - E. CAHIPA, HIPODROMO, CEBU CITY
Name in Print Relationship to the child FATHER Date MAY 15, 2001

21. PREPARED BY Signature JUSTINA D. CLAUDIO Address AGNES C. DENAPO
Name in Print Title or Position D.M. NURSE Date MAY 15, 2001 Title or Position CLERK I

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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CERTIFIED MACHINE COPY FOR OCR FILE

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

