



(Copy for OCR)

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.)

Province Sebu City/Municipality Mandaue City Registry No. 7001-3194

1. NAME (First) (Middle) (Last)
JULIE MARIE APURADO LANOJAN

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

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
Dr. I.M. Cortes Gen. Hosp., Inc. Mandaue City Sebu

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

c. BIRTH ORDER (live births and fetal deaths including this delivery)
second (first, second third, etc.) d. WEIGHT AT BIRTH
3130 grams

6. MAIDEN NAME (First) (Middle) (Last)
Anavio Enclunac Apurado

7. CITIZENSHIP Fil. 8. RELIGION R. 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 Teacher 11. Age at the time of this birth: 32 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Leoc Mandaue City Sebu

13. NAME (First) (Middle) (Last)
Marlan Seguerra Lanojan

14. CITIZENSHIP Fil. 15. RELIGION R. Catholic

16. OCCUPATION None 17. Age at the time of this birth: 28 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
January 10, 1998 - Basak Guihulungan, Negros Oriental

19a. ATTENDANT X 1 Physician X 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 10:47 o'clock am/pm on the date stated above.

Signature LINA S. ENTISE, M.D. Address c/o BINOGHI, Mandaue City
Name in Print Resident Physician Date July 28, 2001

20. INFORMANT
Signature Anavio A. Lanojan Address Leoc, Mandaue City
Name in Print mother Date July 28, 2001

21. PREPARED BY
Signature Marissa Dimay
Name in Print R.M.
Title or Position July 28, 2001

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature CLAVIANA C. BASUPO
Name in Print CITY CIVIL REGISTRAR
Title or Position
Date

REMARKS/ANNOTATION

For CRMS USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41 02070317

48 0

49 2 50 280701

55 020701

61 0

62 05 64 0730

68 0 69 0

70 0 72 0 74 0

76 0 78 0

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86 0 87 0

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AUG 08 2001

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