

(Copy for OCRI)


 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

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

CITY CIVIL REG. OFFICE

NOV 27 2001

Province <u>Cebu</u>		Registry No. <u>2001 2716</u>	
City/Municipality <u>Davao City</u>			
1. NAME (First) (Middle) (Last) <u>LAWIE COLONIA ARICAYOS</u>		For OCRI USE ONLY: Population Reference No.	
2. SEX <u>1</u> Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>19 Nov. 2001</u>	
CHILD	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province) House No., Street, Barangay <u>Davao General Hospital, Davao City, Cebu</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
	5a. TYPE OF BIRTH <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Triplets, etc.		
	b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify		
c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>First</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>2858</u> grams	
6. MAIDEN NAME (First) (Middle) (Last) <u>MILA COLONIA</u>		41	
7. CITIZENSHIP <u>Phil.</u>		8. RELIGION <u>R.O.</u>	
MOTHER	9a. Total number of children born alive: <u>1</u>		42
	b. No. of children still living including this birth: <u>1</u>		
	c. No. of children born alive but are now dead: <u>0</u>		
10. OCCUPATION <u>Barangay Treasurer</u>		11. Age at the time of this birth: <u>38</u> years	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Bactas, Oatran, Cebu</u>		43	
13. NAME (First) (Middle) (Last) <u>RONNIE ARTANOS</u>		44	
14. CITIZENSHIP <u>Phil.</u>		15. RELIGION <u>R.O.</u>	
16. OCCUPATION <u>Farmer</u>		17. Age at the time of this birth: <u>38</u> years	
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Nov. 28, 1998 - Oatran, Cebu</u>		45	
19a. ATTENDANT <u>X</u> 1 Physician <u>2</u> Nurse <u>3</u> Others (Specify) <u>4</u> Midwife (Traditional Midwife)		46	
19b. CERTIFICATION OF BIRTH (I hereby certify that I attended the birth of the child who was born alive at _____ am/pm on the date stated above.) Signature <u>ANTONIO G. RAMIGUEL</u> Address <u>Davao General Hospital</u> Name in Print <u>ANTONIO G. RAMIGUEL, M.D. Davao City, Cebu</u> Title or Position <u>Medical Officer III</u> Date <u>Nov. 19, 2001</u>		47	
20. INFORMANT Signature <u>Mila Aricayos</u> Address <u>Bactas, Oatran, Cebu</u> Name in Print <u>MILA ARICAYOS</u> Relationship to the child <u>Mother</u> Date <u>Nov. 19, 2001</u>		48	
21. PREPARED BY Signature <u>Liza A. Bernal</u> Name in Print <u>LIZA A. BERNAL</u> Title or Position <u>Nurse I</u> Date <u>Nov. 19, 2001</u>		49	
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>ANTONIE TA Y. AVILA</u> Name in Print <u>City Civil Registrar</u> Title or Position <u>City Civil Registrar</u> Date <u>NOV 27 2001</u>		50	

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 Lisa Grace S. Bernal  
 LISA GRACE S. BERSALES, Ph.D.  
 National Statistician and Civil Registrar General  
 Philippine Statistics Authority
