Municipal Form No. 102
(Revised January 2007)

(To be accomplished in quadruplicate using black ink)

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

CERTIFICATE OF LIVE BIRTH

Registry No. 2015 25187

Province: CEBU
City/Municipality: CEBU CITY

CHILD

1. NAME: (First) CHOI TEREIGNZ (Middle) BOLIVAR (Last) ROSALDO
2. SEX (Male / Female): MALE
3. DATE OF BIRTH: (Day) 19 (Month) AUGUST (Year) 2015
4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/House No., St., Barangay) CEBU PUER. CENTER & MATERNITY HOUSE, INC., (City/Municipality) CEBU CITY, (Province) CEBU
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.): SINGLE
5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.): NOT APPLICABLE
5c. BIRTH ORDER (Order of this birth to previous live births including first death) (First, Second, Third, etc.): FIRST
6. WEIGHT AT BIRTH: 2,800 grams

MOTHER

7. MAIDEN NAME: (First) MICAH GRACE (Middle) BURGOS (Last) BOLIVAR
8. CITIZENSHIP: FILIPINO
9. RELIGION/RELIGIOUS SECT: ROMAN CATHOLIC
10a. Total number of children born alive: 1
10b. No. of children still living including this birth: 1
10c. No. of children born alive but are now dead: 0
11. OCCUPATION: NONE
12. AGE at the time of this birth (completed years): 18
13. RESIDENCE: (House No., St., Barangay) (City/Municipality) (Province) (Country) TAWAGAN 1 SIRAO, CEBU CITY, CEBU, PHILS.

FATHER

14. NAME: (First) JULITO JR. (Middle) CODERA (Last) ROSALDO
15. CITIZENSHIP: FILIPINO
16. RELIGION/RELIGIOUS SECT: ROMAN CATHOLIC
17. OCCUPATION: NONE
18. AGE at the time of this birth (completed years): 23
19. RESIDENCE: (House No., St., Barangay) (City/Municipality) (Province) (Country) ROOSEVELT, BUSAY, CEBU CITY, CEBU, PHILS.

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)
20a. DATE (Month) (Day) (Year): NOT MARRIED
20b. PLACE (City / Municipality) (Province) (Country): NOT MARRIED

21a. ATTENDANT
1 Physician 2 Nurse 3 Midwife 4 Hilot (Traditional Birth Attendant) 5 Others (Specify)

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.)
I hereby certify that I attended the birth of the child who was born alive at 8:23PM am/pm on the date of birth specified above.

Signature
Name in Print: IRENE IMPERIAL, M.D.
Title or Position: PHYSICIAN
Address: CEBU PUER. CNTR & MATERNITY HOUSE, INC., CEBU CITY
Date: 19 AUGUST 2015

22. CERTIFICATION OF INFORMANT
I hereby certify that all information supplied are true and correct to my own knowledge and belief.
Signature
Name in Print: MICAH GRACE B. BOLIVAR
Relationship to the Child: MOTHER
Address: TAWAGAN 1 SIRAO, CEBU CITY CEBU
Date: 19 AUGUST 2015

23. PREPARED BY
Signature
Name in Print: CLARISA T. ROXAS
Title or Position: CLERK
Date: 19 AUGUST 2015

24. RECEIVED BY
Signature
Name in Print: LUZ N. CUGAY
Title or Position: ADMINISTRATIVE AIDE III
Date: 10 SEP 2015

25. REGISTERED BY THE CIVIL REGISTRAR
Signature
Name in Print: ATTY. EVANGELINE ABATAYO
Title or Position: CEBU CITY CIVIL REGISTRAR
Date: 10 SEP 2015

REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)

TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR
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BEST POSSIBLE IMAGE
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BReN
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Documentary
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Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority