(Copy for OCRG)

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.)

REMARKS/ANNOTATION

Province: CEBU
City/Municipality: CEBU CITY
Registry No.: 97-15374

FOR OCRG USE ONLY
Population Reference No.

TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR

CHILD

1. NAME (First): ELIZABETH (Middle): PEDRIGOSA (Last): AMAHAN
2. SEX: ___ 1 Male X 2 Female
3. DATE OF BIRTH (day) (month) (year): 29 MAY 1997
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay): BUHISAN (City/Municipality): CEBU CITY (Province): 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 total deaths including this delivery) (first, second, third, etc.): 4
d. WEIGHT AT BIRTH: 2722 grams

MOTHER

6. MAIDEN NAME (First): NILA (Middle): PEDRIGOSA (Last): AMAHAN
7. CITIZENSHIP: FILIPINO
8. RELIGION: ROMAN CATHOLIC
9a. Total number of children born alive: 4
b. No. of children still living including this birth: 3
c. No. of children born alive but are now dead: 1
10. OCCUPATION: HOUSEWIFE
11. Age at the time of this birth: 38 years
12. RESIDENCE (House No., Street, Barangay): BUHISAN (City/Municipality): CEBU CITY (Province): CEBU

FATHER

13. NAME (First): ISABELO (Middle): MILAN (Last): ODIONG
14. CITIZENSHIP: FILIPINO
15. RELIGION: ROMAN CATHOLIC
16. OCCUPATION: LABORER
17. Age at the time of this birth: 43 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
NOT MARRIED

19a. ATTENDANT: ___ 1 Physician ___ 2 Nurse X 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 8:00 o'clock am/pm on the date stated above.
Signature: Tuttak
Name in Print: PAT TITA VENUST
Title or Position: PHM
Address: BUHISAN HEALTH CENTER CEBU CITY
Date: MAY 29, 1997

20. INFORMANT
Signature: Nila Amahan
Name in Print: NILA AMAHAN
Relationship to the child: MOTHER
Address: BUHISAN, CEBU CITY
Date: MAY 29, 1997

21. PREPARED BY
Signature: Tuttak
Name in Print: PAT TITA VENUST
Title or Position: PHM
Date: MAY 29 1997

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature:
Name in Print: EVELYN A ARABIT
Title or Position: CLERK
Date: JUN 27 1997

07984-11-400ARM-00111-BIC01
POSSIBLE IMAGE

BReN
02217-A97KV0R-3

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