



(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.)

Province Bayan Registry No. _____
 City/Municipality Kapalang

CHILD

1. NAME (First) JAN (Middle) PAIZAN (Last) LAPICEROS
 2. SEX 1 Male 2 Female
 3. DATE OF BIRTH (day) (month) (year) 21 March 2000

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
 House No., Street, Barangay) San Miguel, Kapalang, Bayan

MOTHER

5a. TYPE OF BIRTH 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.) 1st
 d. WEIGHT AT BIRTH _____ grams

6. MAIDEN NAME (First) CRISTINA (Middle) PARAGUYA (Last) PAIZAN

7. CITIZENSHIP Philippine 8. RELIGION Roman Catholic

9a. Total number of children born alive: 4 b. No. of children still living including this birth: 4 c. No. of children born alive but are now dead: 0

10. OCCUPATION Housekeeper 11. Age at the time of this birth: 34 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
San Miguel, Kapalang, Bayan

FATHER

13. NAME (First) ROLANDO (Middle) CRISTO (Last) LAPICEROS
 14. CITIZENSHIP Philippine 15. RELIGION Roman Catholic
 16. OCCUPATION Corn Farmer 17. Age at the time of this birth: 38 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
April 29, 1985 Kapalang, Bayan

19a. ATTENDANT 1 Physician 2 Nurse 3 Midwife 4 Health Care Provider 5 Others (Specify) _____

19b. CERTIFICATION OF BIRTH (I hereby certify that I attended the birth of the child who was born alive at _____ o'clock am/pm on the date stated above) 5:00 am

Signature [Signature] Address San Miguel, Kapalang, Bayan
 Name in Print _____ Date March 30, 2000
 Title or Position _____

20. INFORMANT
 Signature [Signature] Address San Miguel, Kapalang, Bayan
 Name in Print Rolando Lapiceros Date March 30, 2000
 Relationship to the child Father

21. PREPARED BY
 Signature [Signature]
 Name in Print NELLY M. TORONIO
 Title or Position Registration Officer I
 Date April 10, 2000

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
 Signature [Signature]
 Name in Print [Name]
 Title or Position Min. Civil Registrar
 Date April 10, 2000

REMARKS/ANNOTATION

For OCRG USE ONLY: Population Reference No. 2105-600EM03-0

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