



Municipal Form No. 102
Revised January 2007

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

Registry No.
2011-3026

Province Cebu		City/Municipality Talisay	
1. NAME (First) FRAISE LOUE PAUL		(Last) BACLAYON	
2. SEX (Male / Female) Male	3. DATE OF BIRTH (Day) 04 (Month) November (Year) 2011	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., St., Barangay) Candulawan Talisay City Cebu	
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) Single	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) First	6. BIRTH ORDER (Order of births to parents live (including still born) (First, Second, Third, etc.) First	6. WEIGHT AT BIRTH 3175 grams
7. MAIDEN NAME (First) Beberlyn		(Last) Baclayon	
8. CITIZENSHIP Philippine		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 the birth (completed years) 19 years		13. RESIDENCE (House No., St., Barangay) Candulawan Talisay City Cebu Phils.	
14. NAME (First) FRAISE		(Middle) LOUE (Last) PAUL	
15. CITIZENSHIP N.A		16. RELIGION/RELIGIOUS SECT N.A	
17. OCCUPATION N.A		18. AGE at the time of the birth (completed years) N.A	
19. RESIDENCE (House No., St., Barangay) N.A (City/Municipality) N.A (Province) N.A (Country) N.A			

MARRIAGE OF PARENTS (If not named, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back)

20a. DATE (Month) (Day) (Year) **N.A** 20b. PLACE (City / Municipality) (Province) (Country) **N.A**

21a. ATTENDANT
 1. Physician _____ 2. Nurse _____ 3. Midwife _____ **X** 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 **10:50 P.M.** on the date of birth specified above.

Signature [Signature] Address **Bulacao, Cebu City**
 Name in Print **Teresita Lantape** Date **November 08, 2011**
 Title or Position **Trained Hilot**

22. CERTIFICATION OF INFORMANT
 I hereby certify that all information supplied are true and correct to my own knowledge and belief.
 Signature [Signature] Name in Print **Beberlyn T. BacLayon**
 Relationship to the Child **Mother** Address **Candulawan, Talisay City, Cebu**
 Date **November 08, 2011**

23. PREPARED BY
 Signature [Signature] Name in Print **Teresita Lantape**
 Title or Position **Trained Hilot** Date **November 08, 2011**

24. RECEIVED BY
 Signature [Signature] Name in Print **Rosalie L. Autor**
 Title or Position **Admin. Officer 1** Date **NOV. 23 2011**

25. REGISTERED BY THE CIVIL REGISTRAR
 Signature [Signature] Name in Print **EMELY S. CABRERA**
 Title or Position **CITY CIVIL REGISTRAR** Date **NOV 23 2011**

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

