

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

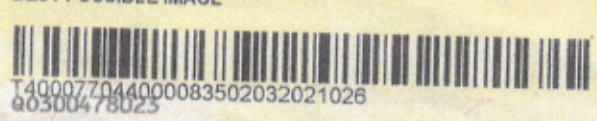
(Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in items 2, 5a, 5b and 19a.)

Province <u>Metros Manila</u>		Registry No. <u>2003-105</u>
City/Municipality <u>Parañaque City</u>		
1. NAME (First) (Middle) (Last) <u>KEANA CHRISTINA PEREZ ANADOR</u>		
2. SEX <input type="checkbox"/> 1 Male <input checked="" type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>23 December 2002</u>
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>4319-D Sts. Barbara St. Ramon Compound, Sun Valley Parañaque City</u>		
5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>First</u>		d. WEIGHT AT BIRTH <u>3716</u> grams
6. MAIDEN NAME (First) (Middle) (Last) <u>MARIBETH CAZANG PEREZ</u>		
7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Catholic</u>
9a. Total number of children born alive: <u>1</u>	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>Housewife</u>		11. Age at the time of this birth: <u>24</u> years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>4319-D Sts. Barbara St. Ramon Compound, Sun Valley Parañaque City</u>		
13. NAME (First) (Middle) (Last) <u>RAFAEL GORDON ANADOR</u>		
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Catholic</u>
16. OCCUPATION <u>Purchaser</u>		17. Age at the time of this birth: <u>45</u> years
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>March 20, 2001 - Cebu</u>		
19a. ATTENDANT <input type="checkbox"/> 1 Physician <input checked="" type="checkbox"/> 2 Midwife (Traditional Midwife) <input type="checkbox"/> 3 Midwife		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born to me at <u>11:00am</u> o'clock am/pm on the date stated above. Signature <u>Aurora Estrada</u> Address <u>303 Ford St. Sto. Nino De Calasand, Brgy. Sun Valley, Parañaque City 1050</u> Name in Print <u>AURORA ESTRADA</u> Date <u>Jan. 6, 2003</u> Title or Position <u>Midwife</u>		
20. INFORMANT Signature <u>Maribeth P. Anador</u> Address <u>4319-D Sts. Barbara St. Ramon Comp. Sun Valley Parañaque City</u> Name in Print <u>MARIBETH P. ANADOR</u> Date <u>Jan. 6, 2003</u> Relationship to the child <u>Mother</u>		
21. PREPARED BY Signature <u>Aurora Estrada</u> Name in Print <u>AURORA ESTRADA</u> Title or Position <u>Midwife</u> Date <u>Jan. 6, 2003</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>Christina G. ...</u> Name in Print <u>CHRISTINA G. ...</u> Title or Position <u>REGISTRATION CLERK</u> Date <u>Jan. 6, 2003</u>

For OCRG USE ONLY:
Population Reference No.

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

