(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: Zambeanga del Sur
City/Municipality: Midsalip
Registry No. 7001-79

For OCRG USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

CHILD

1. NAME (First) CHRISTENE JOEY (Middle) TIK&ING (Last) CALUNOD
2. SEX ___ 1 Male X 2 Female
3. DATE OF BIRTH (day) (month) (year) 22 January 2001
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province) Buleren, Midsalip, Zambeanga del Sur
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 N/A
c. BIRTH ORDER (live births and fetal deaths including this delivery) 1st (first, second, third, etc.)
d. WEIGHT AT BIRTH 2722 grams

MOTHER

6. MAIDEN NAME (First) Florencia (Middle) Termis (Last) Tik-ing
7. CITIZENSHIP Filipino
8. RELIGION R. Cathelic
9a. Total number of children born alive: 01
b. No. of children still living including this birth: 01
c. No. of children born alive but are now dead: 00
10. OCCUPATION Housekeeper
11. Age at the time of this birth: 21 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) Buleren, Midsalip, Zambeanga del Sur

FATHER

13. NAME (First) Reynard (Middle) Davin (Last) Caluned
14. CITIZENSHIP Filipino
15. RELIGION R. Cathelic
16. OCCUPATION Corn Farmer
17. Age at the time of this birth: 19 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
11 March 1999, Molave, Zambeanga del Sur

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 11:00 o'clock am/pm on the date stated above.

Signature: [signature]
Name in Print: NERMILA R. RONDRIQUE
Title or Position: Midwife
Address: Poblacion A, Midsalip, Zambe. Sur
Date: 06 February 2000

20. INFORMANT
Signature: [signature]
Name in Print: REYNARD D. CALUNOD
Relationship to the child: Father
Address: Buleren, Midsalip, Zambe. Sur
Date: 06 February 2001

21. PREPARED BY
Signature: [signature]
Name in Print: JOSIE J. ARTANA
Title or Position: Clerk III
Date: 06 February 2001

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: MEDARDOC. COLITA
Title or Position: Mun. Civil Registrar
Date: 06 February 2001

41 [illegible]
48 1
49 2 50 [illegible]
56 [illegible]
51 1 [illegible]
62 [illegible] 64 [illegible]
68 1 69 1
70 [illegible] 72 [illegible] 74 [illegible]
75 [illegible] 79 [illegible]
81 [illegible]
86 1 87 1
88 [illegible] 91 [illegible]
93 1 031199 73189 [illegible]
94 [illegible]

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BEST POSSIBLE IMAGE

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

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