



Form No. 102
Revised January 1992

(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 13a.)

REMARKS/ANNOTATION

Province CEBU Registry No. 38 27812
City/Municipality CEBU CITY

1. NAME (First) (Middle) (Last)
JOHN PAUL SABANDAL GERONA
2. SEX XX 1 Male 2 Female
3. DATE OF BIRTH (day) (month) (year)
01 NOVEMBER 1998
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
CHONG HUA HOSPITAL, CEBU CITY, CEBU
5a. TYPE OF BIRTH XX 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)
THIRD (first, second, third, etc.)
d. WEIGHT AT BIRTH
2,800 grams

6. MAIDEN NAME (First) (Middle) (Last)
ANABELITA ZAPANTA SABANDAL
7. CITIZENSHIP FILIPINO 8. RELIGION ROMAN CATHOLIC
9a. Total number of children born alive: THREE
b. No. of children still living including this birth: THREE
c. No. of children born alive but are now dead: NONE
10. OCCUPATION HOUSEWIFE 11. Age at the time of this birth: 25 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
86 B T. PADILLA ST., CEBU CITY, CEBU

13. NAME (First) (Middle) (Last)
EDILBERTO CURAPO GERONA JR.
14. CITIZENSHIP FILIPINO 15. RELIGION ROMAN CATHOLIC
16. OCCUPATION MARKETING 17. Age at the time of this birth: 26 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
SEPTEMBER 05, 1995; CEBU CITY, CEBU

19a. ATTENDANT XX 1 Physician 2 Nurse 3 Midwife
4 Hillot (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 10:39 A.M. o'clock am/pm on the date stated above.

Signature [Signature] Address c/o Chong Hua Hospital
Name in Print ELEANOR H. CASQUERO, M.D. Fuente Osmeña, Cebu City
Title or Position Attending Physician Date November 02, 1998

20. INFORMANT
Signature [Signature] Address 86 B T. Padilla St.,
Name in Print EDILBERTO C. GERONA JR. Cebu City
Relationship to the child FATHER Date November 02, 1998

21. PREPARED BY
Signature [Signature]
Name in Print MA. MAGDALENA M. DIAS
Title or Position Clerk - Record Section
Date November 02, 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print LOUELLA N. UREJIL
Title or Position REGISTRATION OFFICER II
Date NOV 04 1998

For OCRG USE ONLY:
Population Reference No.
TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
41
48
49 50
55
61
62 64
66 69
70 72 74
76 79
81
86 87
88 91
93
94

CSM

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

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