

(Copy for OCRG)



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 Laguna Registry No. 99-732  
City/Municipality Calauan

CHILD	1. NAME (First) (Middle) (Last) <b>RIKEL ANNE BAGOOT ANTIPUESTO</b>		
	2. SEX <input type="checkbox"/> 1 Male <input checked="" type="checkbox"/> 2 Female	3. DATE OF BIRTH (day) (month) (year) <b>7 December 1999</b>	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <b>Brgy. Bangyas, Calauan, Laguna</b>		
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.	5b. 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.) <b>3rd</b>		d. WEIGHT AT BIRTH <b>3629</b> grams	

For OCRG USE ONLY:  
Population Reference No. **3406-A99Z701-6**

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <b>FE BAGOOT ANTIPUESTO</b>		
	7. CITIZENSHIP <b>Filipino</b>		8. RELIGION <b>Roman Catholic</b>
	9a. Total number of children born alive: <b>3</b>	b. No. of children still living including this birth: <b>3</b>	c. No. of children born alive but are now dead: <b>0</b>
	10. OCCUPATION <b>housekeeper</b>		11. Age at the time of this birth: <b>33</b> years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <b>Brgy. Bangyas, Calauan, Laguna</b>			

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FATHER	13. NAME (First) (Middle) (Last) <b>MAGNO CAPISTRANO AQUINO</b>		
	14. CITIZENSHIP <b>Filipino</b>		15. RELIGION <b>Roman Catholic</b>
	16. OCCUPATION <b>Laborer</b>		17. Age at the time of this birth: <b>33</b> years

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

**NOT MARRIED**

19a. ATTENDANT  
 1 Physician  2 Nurse  3 Midwife  
 4 Hilot (Traditional Midwife)  5 Others (Specify) \_\_\_\_\_

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19b. CERTIFICATION OF BIRTH  
I hereby certify that I attended the birth of the child who was born alive at **7:30AM** o'clock am/pm on the date stated above.

Signature Antonio C. Cosico Address Brgy. Bangyas Calauan, Laguna  
Name in Print **ANTONIA C. COSICO** Date 12/16/99  
Title or Position Hilot

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20. INFORMANT  
Signature Magno C. Aquino Address Brgy. Bangyas Calauan, Laguna  
Name in Print **MAGNO C. AQUINO** Date 12/16/99  
Relationship to the child Father

21. PREPARED BY  
Signature Ligaya S. Alcantara  
Name in Print **LIGAYA S. ALCANTARA**  
Title or Position Reg. Officer I  
Date 12/16/99

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature Ma. Zena G. Gloria  
Name in Print **MA. ZENA G. GLORIA**  
Title or Position Acting ICR  
Date 12/16/99

93  **2**

94  **4**

