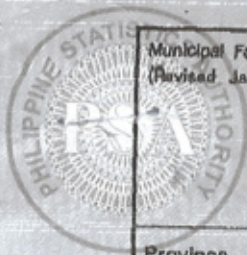


(Copy for OCRG)



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.)

Province <u>Cebu</u>		Registry No. <u>2001 32601</u>		REMARKS/ANNOTATION
City/Municipality <u>Cebu City</u>				
CHILD	1. NAME (First) (Middle) (Last) <u>Nichole</u> <u>Yap</u>			For OCRG USE ONLY: Population Reference No. TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
	2. SEX <u>1</u> Male <u>X</u> 2 Female	3. DATE OF BIRTH (day) (month) (year) <u>20</u> <u>Nov.</u> <u>2001</u>		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) <u>House No., Street, Barangay</u> <u>96-J Gorordo Ave., Kamputhaw Cebu City</u>			
	5a. TYPE OF BIRTH <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Triplet, etc.	b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify		
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>1st</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>2.250</u> grams		
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>Juliet Belocura Yap</u>			41
	7. CITIZENSHIP <u>Filipina</u>		8. RELIGION <u>R.C.</u>	48 50
	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>	56
	10. OCCUPATION <u>Factory Worker</u>		11. Age at the time of this birth: <u>33</u> years	51
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>1535 Stephenson St., Lahug, Cebu City</u>			52 54
FATHER	13. NAME (First) (Middle) (Last) <u>Rechil Unabia Mancelita</u>			58 59
	14. CITIZENSHIP <u>Phil.</u>		15. RELIGION <u>R.C.</u>	60
	16. OCCUPATION <u>Self Employed</u>		17. Age at the time of this birth: <u>29</u> years	62 64
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Not Married</u>				66 68 70 72 74
19a. ATTENDANT <u>1</u> Physician <u>2</u> Nurse <u>X</u> 3 Midwife <u>4</u> Hilot (Traditional Midwife) <u>5</u> Others (Specify)				76 78
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>10:00</u> o'clock am/pm on the date stated above.				81
Signature <u>Margarita F. Dunac</u> Name in Print <u>Margarita F. Dunac</u> Title or Position <u>P.M.H.</u>		Address <u>96-J Gorordo Ave. Kamputhaw Cebu City</u> Date <u>Nov. 20, 2001</u>		86 87
Signature <u>Rechil U. Mancelita</u> Name in Print <u>Margarita F. Dunac</u> Relationship to the child <u>Father</u>		Address <u>1535 Stephenson St., Lahug, Cebu City</u> Date <u>Nov. 20, 2001</u>		88 91
21. PREPARED BY Signature <u>Suzette R. Mifozza</u> Name in Print <u>Suzette R. Mifozza</u> Title or Position <u>R.M.</u> Date <u>Nov. 20 2001</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>N. DEJETA</u> Name in Print <u>N. DEJETA</u> Title or Position <u>CIVIL REGISTRAR</u> Date <u>NOV 27 2001</u>		93 94

000040

06971-53-400KGC-01475-BI001

BEST POSSIBLE IMAGE

BReN
02217-B01XL1F-0

Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.