

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 Cebu Registry No. 95-18790  
City/Municipality Cebu City

CHILD	1. NAME (First) (Middle) (Last) <u>Kimberly Regani Mambaling</u>		
	2. SEX <u>1 Male</u> <u>X 2 Female</u>		3. DATE OF BIRTH (day) (month) (year) <u>29</u> <u>1995</u> <u>July</u>
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province) <u>Puerto Alcala Mambaling Cebu City</u>		
	5a. TYPE OF BIRTH <u>X 1 Single</u> <u>2 Twin</u> <u>3 Triplet, etc.</u>		
b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> <u>2 Second</u> <u>3 Others, Specify</u>			
c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>5th</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3260</u> grams	

For OCRG USE ONLY:  
Population Reference No.TO BE FILLED UP AT THE  
OFFICE OF THE CIVIL  
REGISTRAR41  
951879048  
749 50  
2 29079556  
2217861  
762 64  
05 326068 69  
7 770 72 74  
05 05 0776 79  
720 2481  
2217885 87  
7 7  
01187  
22178  
08049588 91  
432 3093  
794  
4

MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>Genessa Suarez Regano</u>		
	7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Roman Catholic</u>
	9a. Total number of children born alive: <u>5</u>	b. No. of children still living including this birth: <u>5</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>513 Puerto Alcala Mambaling Cebu City</u>			
FATHER	13. NAME (First) (Middle) (Last) <u>Alexander Aguirre Mambaling</u>		
	14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>
	16. OCCUPATION <u>Balut vendor</u>		17. Age at the time of this birth: <u>30</u> years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
Jan 11, 1987 San Roque Parish Mambaling, Cebu City19a. ATTENDANT  
X 1 Physician 2 Nurse 3 Midwife  
X 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 9:30 P.M. o'clock am/pm on the date stated above.Signature Serenia Alfonso Address Alaska Mambaling  
Name in Print Serenia Alfonso C.C.  
Title or Position Trained Hilot Date July 29, 199520. INFORMANT  
Signature Mambaling Address 513 Puerto Alcala,  
Name in Print GERONIA GERONINGO Mambaling Cebu City  
Relationship to the child mother Date July 29, 199521. PREPARED BY  
Signature Serenia Alfonso  
Name in Print Serenia Alfonso  
Title or Position Trained Hilot  
Date July 29, 199522. RECEIVED AT THE OFFICE OF  
THE CIVIL REGISTRAR  
Signature NUNEZ  
Name in Print CLERK III  
Title or Position RCRD AUG 04 1995  
Date

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