



(Copy for OCR)

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 <small>(Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in items 2, 5a, 5b and 19a.)</small>					
Province <u>Cebu</u>			Registry No. <u>2005 149</u>		
City/Municipality <u>CARAGA</u>					
CHILD	1. NAME (First) (Middle) (Last) <u>EAREN ALTAVERES CENODISPANON</u>		TO BE FILLED UP BY THE OFFICE OF THE CIVIL REGISTRAR 06 06 00 280705 06 06 00 27038 03045 80138 1		
	2. SEX <u>1 Male XX</u> 2 Female				
	3. DATE OF BIRTH (day) (month) (year) <u>09 July 2005</u>				
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province) <u>Sto. Nino, Poblacion III, Cagrar, Cebu</u>				
MOTHER	5a. TYPE OF BIRTH <u>1 Single</u> 2 Twin 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> 2 Second 3 Others, Specify		
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>1st</u>		d. WEIGHT AT BIRTH <u>3266</u> grams		
	6. MAIDEN NAME (First) (Middle) (Last) <u>Chona Sabala Alicante</u>		7. CITIZENSHIP <u>Filipino</u>		
	8. RELIGION <u>Roman Catholic</u>		9a. Total number of children born alive: <u>6</u>		
10. OCCUPATION <u>Housekeeper</u>		b. No. of children still living including this birth: <u>6</u>			
11. Age at the time of this birth: <u>10</u> years		c. No. of children born alive but are now dead: <u>0</u>			
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Sto. Nino, Poblacion III, Cagrar, Cebu</u>		13. NAME (First) (Middle) (Last) <u>Charles Terano Cenodispanon</u>			
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>			
16. OCCUPATION <u>Shoemaker</u>		17. Age at the time of this birth: <u>34</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>22 March 1969 Cagrar, Cebu</u>					
19a. ATTENDANT <u>22 March 1969 Cagrar, Cebu</u> <u>1 Physician</u> <u>2 Nurse</u> <u>3 Midwife</u> <u>4 Heil (Traditional Midwife)</u> <u>5 Others (Specify)</u> <u>X</u>					
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>8:00 a.m.</u> o'clock am/pm on the date stated above.					
Signature <u>[Signature]</u>		Address <u>Poblacion III, Cagrar, Cebu</u>			
Name in Print <u>WANGYINA TAPIA</u>		Date <u>08 July 2005</u>			
Title or Position <u>DM</u>					
20. INFORMANT Signature <u>[Signature]</u> Address <u>Sto. Nino Pob. III, Cagrar, Cebu</u> Name in Print <u>MARCISA ALTAVERES</u> Date <u>04 August 2005</u> Relationship to the child <u>Grandmother</u>					
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>TERESA S. CINEZA</u> Title or Position Date <u>04 August 2005</u>			22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>SOBA A. MARGAN</u> Title or Position <u>Asst. Registration Officer</u> Date <u>04 August 2005</u>		

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BEST POSSIBLE IMAGE



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[Signature]
CARMELITA N. ERICIA
Administrator and Civil Registrar General
National Statistics Office