



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. 2000 06761

City/Municipality CEBU CITY

1. NAME (First) (Middle) (Last) JOHN DANIE TANTO-AN BULOSAN

2. SEX 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year) 23 MARCH 2000

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) CEBU PUER. CENTER & MAT. HOUSE INC. CEBU CITY CEBU

5a. TYPE OF BIRTH 1 Single 2 Twin 3 Triplet, etc. b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Others, Specify

c. BIRTH ORDER (five births and fetal deaths including this delivery) d. WEIGHT AT BIRTH SECOND (first, second, third, etc.) 3,100 grams

6. MAIDEN NAME (First) (Middle) (Last) SALOME TANTOLA TANTO-AN

7. CITIZENSHIP FILIPINO 8. RELIGION ROMAN CATHOLIC

9a. Total number of children born alive: 2 b. No. of children still living including this birth: 2 c. No. of children born alive but are now dead: 0

10. OCCUPATION TREASURY SUPERVISOR 11. Age at the time of this birth: 36 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) BLK. 4, LOT 33, VILLA LEYSON, BACAYAN, CEBU CITY CEBU

13. NAME (First) (Middle) (Last) RAMON de la CRUZ BULOSAN

14. CITIZENSHIP FILIPINO 15. RELIGION ROMAN CATHOLIC

16. OCCUPATION ELECTRICAL ENGINEER 17. Age at the time of this birth: years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) MAY 13, 1994 CEBU CITY

19a. ATTENDANT 1 Physician 2 Nurse 3 Midwife 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 12:20 a.m. o'clock am/pm on the date stated above.

Signature LOUDET HAZEL GENIZA, M.D. Address CEBU PUER. CENTER & MAT. HOUSE INC. CEBU CITY Title or Position PHYSICIAN Date MARCH 23, 2000

20. INFORMANT Signature SALOME BULOSAN Address BLK. 4, LOT 33, VILLA LEYSON, BACAYAN, CEBU CITY Relationship to the child MOTHER Date MARCH 23, 2000

21. PREPARED BY Signature EYE O. BORRES Name in Print CLERK Title or Position Date MARCH 23, 2000

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature JOEL N. DE LA CERNA Name in Print CLERK I Title or Position Date MAR 28 2000

For OCRG USE ONLY: Population Reference No. 2217-B00EP04-2

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

Grid for OCRG use with numbers 41-84 and checkboxes.

09179-AB-400GCV-01183-BI001



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