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PHILIPPINE STATISTICS AUTHORITY

(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: ____
City/Municipality: Manila

Registry No. 2001 - 103722

REMARKS/ANNOTATION

For OCRG USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: A 0 1 A 9 2 2

48: 1

49: 2 50: 0 9 1 1 0 1

56: 9 0 1 6

61: 1

62: 0 8 64: 3 1 0 6

68: 1 69: R

70: 0 2 72: 0 1 74: 0 1

78: 3 2 6 79: 2 9

81: 9 0 1 6

86: 1 87: 2420

88: 1 C 9 89: 3 C

93: 1

94: 1

CHILD

1. NAME: (First) Ahely June (Middle) Ora (Last) Illustrisimo

2. SEX: ____ 1 Male X 2 Female

3. DATE OF BIRTH (day) (month) (year): 9 November 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): SAT. ANDRES BONIFACIO MEM. MED CTR. TDO. MLA.

5a. TYPE OF BIRTH: X 1 Single ____ 2 Twin ____ 3 Triplet, etc.

b. IF MULTIPLE BIRTH, CHILD WAS: ____ 1 First ____ 2 Second ____ 3 Others, Specify

c. BIRTH ORDER (live births and total deaths including this delivery) (first, second, third, etc.): second

d. WEIGHT AT BIRTH: 3,100 grams

MOTHER

6. MAIDEN NAME: (First) Yolanda (Middle) Macaya (Last) Ora

7. CITIZENSHIP: Pilipino

8. RELIGION: Jehovah's Witnesses

9a. Total number of children born alive: 02

b. No. of children still living including this birth: 01

c. No. of children born alive but are now dead: 01

10. OCCUPATION: housekeeper

11. Age at the time of this birth: 29 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): Dist. 03 Brgy.276 Zone25/Area H,Parola B,Tdo.,Mla.

FATHER

13. NAME: (First) Ede (Middle) Pansey (Last) Illustrisimo

14. CITIZENSHIP: Pilipino

15. RELIGION: Roman Catholic

16. OCCUPATION: Construction Worker

17. Age at the time of this birth: 35 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.): November 16,2000/ Karuhatan,Valenzuela City

19a. ATTENDANT: X 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 5:26 pm o'clock am/pm on the date stated above.

Signature: ____
Name in Print: Marilou Chua M.D.
Title or Position: Physician
Address: SAT. ANDRES BONIFACIO MEM. MED CTR. TDO. MLA
Date: November 9, 2001

20. INFORMANT
Signature: ____
Name in Print: Yolanda Ora Illustrisimo
Relationship to the child: Mother
Address: 276 Area H. Parola
Date: 11-09-01

21. PREPARED BY
Signature: ____
Name in Print: Kimer K. Johnson
Title or Position: Clerk II
Date: November 9, 2001

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: ____
Name in Print: FOR: GLORIA C. PAGDILAO
Title or Position: CITY CIVIL REGISTRAR
Date: DEC 03 2001

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

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