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Municipal Form No. 102  
(Revised 1953)

To be accomplished in triplicate

REPUBLIC OF THE PHILIPPINES  
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. 87-3998  
CITY/MUNICIPALITY Lapuyan

1. NAME (First) Malon (Middle) Enselon (Last) Boyshin

2. SEX (Place 'X' on appropriate answer) 1 Male 2 Female 3. DATE OF BIRTH (Day) 13 (Month) December (Year) 1987

4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/leguway) John Hallamity Home (City/Municipality) Lapuyan (Province) Cebu

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 1 Single 2 Twin 3 Three or more b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc.

6. MOTHER'S NAME (First) Majima D. (Middle) Enselon (Last) 7. NATIONALITY P, C 8. RELIGION P, C

9. NAME (First) Felix (Middle) Enselon (Last) 10. NATIONALITY P, C 11. RELIGION P, C

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment of the back) May 8/85 Lapuyan

13. CERTIFICATE OF ATTENDANT AT BIRTH 7:30  
I hereby certify that I attended the birth of the child who was born alive at 7:30 o'clock a.m. / p.m. on the date stated above.

Signature [Signature] Address 04H  
Name in print [Name] Title or position [Title] Date 12-17-87

14. INFORMANT  
Signature \_\_\_\_\_ Address \_\_\_\_\_  
Name in print \_\_\_\_\_ Date \_\_\_\_\_  
Relationship to child \_\_\_\_\_

15a. PREPARED BY  
Signature [Signature] Signature 4020  
Name in print [Name] Name in print \_\_\_\_\_  
Title or position [Title] Title or position \_\_\_\_\_  
Date 12-17-87 Date \_\_\_\_\_

15c. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED

(Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar.)

PROVINCE Cebu Local Civil Registry No. 8703998 Registration Status 1  
CITY/MUNICIPALITY Lapuyan

17. Weight at Birth (in grams) 6.16 2722 18. Birth Order of Child Ex. first, second, etc. 03

19a. Total Number of Children Born Alive 03 22 b. How many children are now living including this birth? 03 24 c. How many children were born alive but are now dead? 00 25

20. Usual Occupation Housekeeper 270 21. Age at the time of this Birth 30 30

22. Usual Residence (Barangay) Hunay Hunay (City/Municipality) Lapuyan (Province) Cebu 220619

23. Usual Occupation Driver 0187 24. Age at the time of this Birth 20 20

25. Attendant of Birth (Place 'X' on appropriate answer) 1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others 03

Sex 1 Date of Birth 18/12/87 Place of Birth 27269 Mother's Nationality 1 Father's Nationality 1

NAME OF CHILD  
First MALON Middle ENSELON Last BOYSHIN

09082-96-400WTD-02080-B1001  
BEST POSSIBLE IMAGE  
T00109082400020801122024001



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