



Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

(Copy for OCRG)

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.)

REMARKS/ANNOTATION

Province ZAMBOANGA DEL NORTE
City/Municipality KATIPUNAN

Registry No. 2000-194

1. NAME (First) JELAINE (Middle) TAN-ANON (Last) SUPITER

2. SEX
1 Male 2 Female

3. DATE OF BIRTH (day) (month) (year)
31 January 2000

For OCRG USE ONLY:
Population Reference No.

7203-000102-1

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/
House No., Street, Barangay) (City/Municipality) (Province)
Daanglungsod, Katipunan, Zamboanga del Norte

TO BE FILLED BY THE
OFFICE OF THE CIVIL
REGISTRAR

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

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

41

80000194

c. BIRTH ORDER (live births and fetal deaths
including this delivery) (first, second, third, etc.)
2nd

d. WEIGHT AT BIRTH
unknown grams

48

1

6. MAIDEN NAME (First) NELIA (Middle) ARRELOS (Last) TAN-ANON

49

8

50

31012000

7. CITIZENSHIP
Filipino

B. RELIGION
Roman Catholic

56

72033

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

61

1

10. OCCUPATION
Housekeeper

11. Age at the time
of this birth: 27 years

62

029999

64

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Daanglungsod, Katipunan, Zamboanga del Norte

13. NAME (First) JOSE (Middle) LAGIDAP (Last) SUPITER

14. CITIZENSHIP Filipino

15. RELIGION
Roman Catholic

68

1

69

1

16. OCCUPATION Driver

17. Age at the time
of this birth: 25 years

70

020200

72

02

74

00

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of
Acknowledgment/Admission of Paternity at the back.)
May 04, 1994, Katipunan, Zamboanga del Norte

19a. ATTENDANT
 1 Physician 2 Nurse 3 Midwife
 4 Midwife (Traditional) 5 Others (Specify)

76

220

79

27

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at 1:30 AM o'clock
am/pm on the date stated above.

81

72033

Signature [Signature] Address Malugan, Katipunan, Zamboanga del Norte

86

1

87

0960

20. INFORMANT
Signature [Signature] Address Daanglungsod, Katipunan, Zamboanga del Norte

88

985

91

25

Name in Print NELIA SUPITER Relationship to the child Mother
Date January 24, 2000

21. PREPARED BY
Signature [Signature] Address Malugan, Katipunan, Zamboanga del Norte

93

1

07041994

94

3

72033



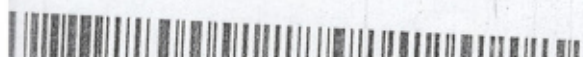
RECEIVED AT THE OFFICE OF
THE CIVIL REGISTRAR

Signature [Signature] Name in Print JAYBERT A. ALAYO
Title or Position Mun. Civil Registrar
Date February 24, 2000

02242000 96

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POSSIBLE IMAGE



BReN
07203-B00BX01-3

Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.