

(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 10a.)

REMARKS/ANNOTATION

Province BRIGIDA DEL NORTE Registry No. 214-26
City/Municipality PLAZA

1. NAME (First) (Middle) (Last)
JUAN MICHAEL QUINTO

2. SEX: 1 Male 2 Female

3. DATE OF BIRTH (day) (month) (year)
15 June 1999

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay)
MAGSAYSAY, PLAZA, BRIGIDA DEL NORTE

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

5b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Others, Specify

6. MAIDEN NAME (First) (Middle) (Last)
CARABELA CARASA QUINTO

7. CITIZENSHIP Philippine 8. RELIGION Roman Catholic

9a. Total number of children born alive: 11 b. No. of children living including this birth: 11 c. No. of children born alive but are now dead: 0

10. OCCUPATION Housekeeper 11. Age at the time of this birth: 28 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Magsaysay Plaza, Brigida del Norte

13. NAME (First) (Middle) (Last)
ROSEMARY GARCIA DELA CRUZ

14. CITIZENSHIP Philippine 15. RELIGION Roman Catholic

16. OCCUPATION Teacher 17. Age at the time of this birth: 28 years

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18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
Not Married

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

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

Signature: [Signature] Address: Civil, Plaza
Name in Print: ROSEMARY A. GARCIA Signature: [Signature]
Title or Position: Midwife Date: April 12, 2004

20. INFORMANT
Signature: [Signature] Address: Magsaysay Plaza
Name in Print: ROSEMARY A. GARCIA Signature: [Signature]
Relationship to the child: Mother Date: April 12, 2004

21. PREPARED BY
Signature: [Signature]
Name in Print: ROSEMARY A. GARCIA
Title or Position: Midwife
Date: April 12, 2004

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [Signature]
Name in Print: ROSEMARY A. GARCIA
Title or Position: Midwife
Date: April 12, 2004

CSM