

(Copy for OCRG)



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 City/Municipality CEBU CITY Registry No. 2012 2370

1. NAME (First) (Middle) (Last) REING MARLIZ AMORSS AMISTOSO 2. SEX [X] 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year) 22 March 2002

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) VICENTE SOTTO MEMORIAL MEDICAL CENTER, CEBU CITY, CEBU

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

c. BIRTH ORDER (live births and fetal deaths including this delivery) 2nd (first, second, third, etc.) d. WEIGHT AT BIRTH 3969 grams

6. MAIDEN NAME (First) (Middle) (Last) MARY MAE AMORO AMORSS

7. CITIZENSHIP FILIPINO 8. RELIGION R.C.

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 EMPLOYEE 11. Age at the time of this birth: 25 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) TRABAO, CORDOVA, CEBU

13. NAME (First) (Middle) (Last) RULSE TABICO AMISTOSO

14. CITIZENSHIP FILIPINO 15. RELIGION R.C.

16. OCCUPATION SELF-EMPLOYED 17. Age at the time of this birth: 29 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) NOVEMBER 28, 1998 - CEBU 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 7:37 A.M. o'clock am/pm on the date stated above.

Signature Name in Print Title or Position Date Address RICHELLE AQUINA, M.D. MEDICAL OFFICER III April 26, 2002 VERMIG, CEBU CITY

20. INFORMANT Signature Name in Print Relationship to the child Date Address MARY MAE AMISTOSO MOTHER April 26, 2002 Trabao, Cordova, Cebu

21. PREPARED BY Signature Name in Print Title or Position Date Address TERESA AMORSS NURSE II April 26, 2002 22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature Name in Print Title or Position Date

For OCRG USE ONLY: Population Reference No. TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR 41 48 49 50 56 61 62 64 68 69 70 72 74 76 78 81 86 87 88 91 92 94 000170

05/12/2002



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

