



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.)

Province Cebu Registry No. 2001 27634
City/Municipality Cebu City

REMARKS/ANNOTATION

1. NAME (First) (Middle) (Last)
CEDRIC YHON ABASA PIDLACAN

2. SEX 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year)
10 Oct. 2001

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Barangay) Cebu Doctors' Hospital Cebu City Cebu

5a. TYPE OF BIRTH 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 fetal deaths including this delivery) 1st (first, second, third, etc.) d. WEIGHT AT BIRTH
3,175 grams

6. MAIDEN NAME (First) (Middle) (Last)
Lea Abasa

7. CITIZENSHIP Filipino 8. RELIGION Roman Catholic

9a. Total number of children born alive: 01 b. No. of children still living including this birth: 01 c. No. of children born alive but are now dead: 00

10. OCCUPATION Housewife 11. Age at the time of this birth: 24 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Matumbo, Pusok Lapulapu City Cebu

13. NAME (First) (Middle) (Last)
Ermo Montellano Pidlacan

14. CITIZENSHIP Filipino 15. RELIGION Roman Catholic

16. OCCUPATION Production Associate 17. Age at the time of this birth: 24 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
June 28, 2001, Lapulapu City

19a. ATTENDANT 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 12:46 P.M. o'clock
am/pm on the date stated above.

Signature [Signature] Address Cebu Doctors' Hospital
Name in Print PRENDES GALBO, M.D. Osmeña Blvd., Cebu City
Title or Position Attending Physician Date Oct. 10, 2001

20. INFORMANT
Signature [Signature] Address Matumbo, Pusok
Name in Print Ermo M. Pidlacan Lapulapu City
Relationship to the child Father Date Oct. 10, 2001

21. PREPARED BY
Signature [Signature]
Name in Print Dan D. Ministerio
Title or Position Medical records clerk
Date Oct. 10, 2001

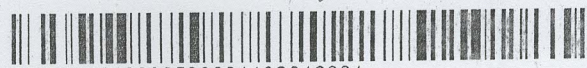
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print ROSALBA N. DE VERA
Title or Position REGISTRATION OFFICER - 5
Date Oct 10 2001

For OCRG USE ONLY
Registration Reference No.

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BEST POSSIBLE IMAGE



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Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

