

(Copy for OCRG)



Form No. 102 (Revised January 1983)

(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 Southern Leyte Registry No. 300-1051

1. NAME: Nicanor City (Middle) (Last)

2. SEX: DRAZEN JULIANNE 3. SUPERIOR BIRTH: PADOLINA (year)

4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/ (City/Municipality) Marabou 2001

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 (five births and fetal deaths including this delivery) (first, second, third, etc.) d. WEIGHT AT BIRTH: 3,000 grams

6. MOTHER'S NAME: Victoria Jessica Cabalquinto (First) (Middle) (Last)

7. CITIZENSHIP: Filipino RELIGION: Roman Catholic

8a. Total number of children born alive: 7 b. No. of children still living including this birth: 3 c. No. of children born alive but are now dead: 0

10. OCCUPATION: Gov't. Employee 11. Age at the time of this birth: 27 years

12. RESIDENCE: (House No., Street, Barangay) (City/Municipality) (Province)

13. NAME: ABGEO, Maasin City (Last)

14. CITIZENSHIP: Dennis Cabalquinto RELIGION: Roman Catholic

15. OCCUPATION: Gov't. Employee 17. Age at the time of this birth: 27 years

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

19a. ATTENDED BY: 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 6:17 am/pm on the date stated above.

Signature: [Signature] Address: Abgao, Maasin City Title of Position: HONELIANA B. DAJAO, M.D. Date: 3/23/01

20. INFORMANT: Victoria Jessica Cabalquinto (Name in Print) Address: Abgao, Maasin City Relationship to Informant: MOTHER Date: 3/23/01

21. PREPARED BY: Paquita A. Falen (Signature) Title of Position: Midwife Date: 2/23/01 22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR: [Signature] Title of Position: CIVIL REGISTRAR - DELIVERATE Date: 5/24/2001

41: 001010511 42: 1 43: 2 44: 280301 45: 64071 46: 1 47: 03 48: 3006 49: 7 50: 7 51: 03 52: 03 53: 06 54: 199 55: 32 56: 64071 57: 1 58: 199 59: 27 60: 1 61: 07/12/77 62: 3770 63: 1 64: 05/24/2001 1580

08622-2A-991CTP-00909-BI001

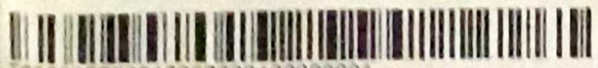
BReN 06407-B01FU03-2

CSM

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

BEST POSSIBLE IMAGE

Documentary Stamp Tax Paid



T080066229910090908102023001 Y0800660006

