



(Copy for OC-G)

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 19a.)

REMARKS/ANNOTATION

Province CEBU  
City/Municipality CEBU CITY Registry No. 2005 19284

1. NAME ERM NINO WINE (First) TAPIC (Middle) ENRIOSO (Last)  
2. SEX  1 Male  2 Female  
3. DATE OF BIRTH (day) (month) (year)  
21 MAY 2005  
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
WELL FAMILY MIDWIFE CLINIC, OGON PARDO CEBU CITY  
5a. TYPE OF BIRTH  1 Single  2 Twin  3 Triplet, etc.  
b. IF MULTIPLE BIRTH, CHILD WAS  1 First  2 Second  3 Other, Specify

c. BIRTH ORDER (five births and fetal deaths including this delivery) 1st (first, second, third, etc.)  
d. WEIGHT AT BIRTH 3175 grams

6. MAIDEN NAME (First) MARY-ANN (Middle) ABADILLA (Last) TAPIC  
7. CITIZENSHIP FILIPINO  
8. RELIGION ROMAN CATHOLIC

9a. Total number of children born alive: 1  
b. No. of children still living including this birth: 1  
c. No. of children born alive but are now dead:

10. OCCUPATION NONE  
11. Age at the time of this birth: 30 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
INAYAMAN, PARDO CEBU CITY

13. NAME (First) BLUENAY (Middle) ENRIOSO (Last)  
14. CITIZENSHIP FILIPINO  
15. RELIGION ROMAN CATHOLIC

16. OCCUPATION BUSINESS MAN  
17. Age at the time of this birth: 19 years

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 Hept (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 8:00 am/pm on the date stated above.

Signature [Signature] Address WMC OOGON-PARDO  
Name in Print GENEVIEVE SIBAYO CEBU CITY  
Title or Position R.M. Date 5-24-2005

20. INFORMANT  
Signature [Signature] Address INAYAMAN PARDO  
Name in Print WENDELL B. ENRIOSO CEBU CITY  
Relationship to the child FATHER Date 5-24-2005

21. PREPARED BY  
Signature [Signature] Address CEBU CITY  
Name in Print ANA GLORIE PUSPUS  
Title or Position ASST. TOWLER Date 5-24-2005  
22. RECEIVED BY THE OFFICE OF THE CIVIL REGISTRAR  
Signature [Signature] Address CEBU CITY  
Name in Print OSCAR B. MOLO  
Title or Position REGISTRATION OFFICER IV Date 24 JUN 2005

JUL 05 2005

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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

