

(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, 6b and 19a.)

Province Surigao Del Norte Registry No. 2201-24  
City/Municipality Surigao City

**1. NAME** (First) (Middle) (Last)  
JOYCE BARAHAN BALLO

**2. SEX** 1 Male  2 Female  **3. DATE OF BIRTH** (day) (month) (year)  
20 DECEMBER 2000

**4. PLACE OF BIRTH** (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
CARAGA Regional Hospital Surigao City Surigao Del Norte

**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) (first, second, third, etc.) First **d. WEIGHT AT BIRTH**  
7 lbs. and 3 grams

**6. MAIDEN NAME** (First) (Middle) (Last)  
JOSEPHINE BARAHAN

**7. CITIZENSHIP** Filipino **8. RELIGION** 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:** 0

**10. OCCUPATION** None **11. Age at the time of this birth:** 23 years

**12. RESIDENCE** (House No., Street, Barangay) (City/Municipality) (Province)  
CGP, Upper Bonotan, Surigao City

**13. NAME** (First) (Middle) (Last)  
BALTASAR M. BALLO

**14. CITIZENSHIP** Filipino **15. RELIGION** Catholic

**16. OCCUPATION** I.V. **17. Age at the time of this birth:** 40 years

**18. DATE AND PLACE OF MARRIAGE OF PARENTS** (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
January 8, 2000 Biliran, Misamis Oriental Church, Surigao City

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

**19b. CERTIFICATION OF BIRTH**  
I hereby certify that I attended the birth of the child who was born alive at 6:03 a.m. o'clock am/pm on the date stated above.  
Signature [Signature] Address CGM Regional Hospital  
Name in Print JOYCE BARAHAN BALLO Surigao City  
Title or Position CIVIL REGISTRAR III Date December 20, 2000

**20. INFORMANT**  
Signature [Signature] Address CGM, Upper Bonotan,  
Name in Print BALTASAR M. BALLO Surigao City  
Relationship to the child FATHER Date December 20, 2000

**21. PREPARED BY** Signature [Signature] Name in Print JOYCE BARAHAN BALLO Title or Position Midwife on duty Date Dec. 20, 2000

**22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR** Signature [Signature] Name in Print JOYCE BARAHAN BALLO Title or Position Reg. Officer III Date 12/20/00

THE BIRTH USE ONLY:  
Population Reference No.

FILED UP AT THE OFFICE OF THE CIVIL REGISTRAR

60100034

1

2 201200

67249

1

013402

1 1

01 01 00

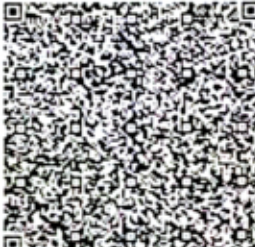
000 23

67249

1 1 0370

X 20 49

31



09293-0E-999JGL-10730-BI001  
BEST POSSIBLE IMAGE  
T001092939991073006112025001

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

