



(Copy for OCR)

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 <u>Cavite</u>		Registry No. <u>2001-12380</u> <i>Gift</i>		[REMARKS/ANNOTATION AREA]
City/Municipality <u>Dasmariñas</u>				
1. NAME (First) <u>Aljen</u> (Middle) (Last) <u>Torrecocha</u>		3. DATE OF BIRTH <u>Nov 23 2001</u> (day) (month) (year)		
2. SEX <u>X</u> <u>Male</u> <u>Female</u>				
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay <u>Salitran II Dasmariñas, Cavite</u>				
5a. TYPE OF BIRTH <u>1</u> Single <u>2</u> Twin <u>3</u> Triplet, etc.		5b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify		
c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>1</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>37500</u> grams		
6. MAIDEN NAME (First) <u>Janifer</u> (Middle) <u>G.</u> (Last) <u>Torrecocha</u>				
7. CITIZENSHIP <u>Phil.</u>		8. RELIGION <u>Cat.</u>		
9a. Total number of children born alive <u>1</u>		9b. No. of children still living including this birth <u>1</u>		
		9c. No. of children born alive but are now dead <u>0</u>		
10. OCCUPATION <u>Sales Lady</u>		11. Age at the time of this birth: <u>28</u> years		
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Salitran II Dasmariñas, Cavite</u>				
13. NAME (First) (Middle) (Last)				
14. CITIZENSHIP		15. RELIGION		
16. OCCUPATION		17. Age at the time of this birth: _____ years		
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Not Married</u>				
19a. ATTENDANT <u>X</u> <u>1</u> Physician <u>2</u> Nurse <u>3</u> Midwife <u>4</u> Hilot (Traditional Midwife) <u>5</u> Others (Specify)				
19b. CERTIFICATION OF BIRTH <u>12130</u> I hereby certify that I attended the birth of the child who was born alive at _____ o'clock am/pm on the date stated above.				
Signature <u>Benjie R. Villas</u> Address <u>130 Salitran II Dasmariñas, Cavite</u> Name in Print <u>Benjie R. Villas</u> Date <u>Nov. 23, 2001</u> Title or Position _____				
20. INFORMANT Signature <u>Janifer Torrecocha</u> Address <u>Same Above</u> Name in Print <u>Janifer Torrecocha</u> Date <u>Nov. 23, 2001</u> Relationship to the child <u>Mother</u>				
21. PREPARED BY Signature <u>Benjie R. Villas</u> Name in Print <u>Benjie R. Villas</u> Title or Position <u>Registrar</u> Date <u>Nov. 23, 2001</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>Alicia Trinidad</u> Name in Print <u>ALICIA TRINIDAD</u> Title or Position <u>M.R. Clerk</u> Date <u>DEC. 21, 2001</u>		

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

