

Philippine Form No. 102  
(Prescribed No. 31)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES  
CERTIFICATE OF LIVE BIRTH  
(Fill out completely, accurately and legibly in ink or typewriter)

87-31773

PROVINCE Metro Manila LOCAL CIVIL REGISTRY, NO. \_\_\_\_\_

CITY / MUNICIPALITY \_\_\_\_\_

1. NAME (First, Middle, Last)  
KEITH BACAVIAL RECINTO

2. SEX (Place 'X' on appropriate answer) 3. DATE OF BIRTH (Day, Month, Year)  
X Male 5 AUGUST 1987

4. PLACE OF BIRTH (Name of Hospital/Institution; if not in hospital, give street/barangay) (City/Municipality) (Province)  
St. Agnes Gen. Hospital Quezon City

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) b. IF MULTIPLE BIRTH, CHILD WAS  
X Single 1 First

6. MAIDEN NAME (First, Middle, Last) 7. NATIONALITY 8. RELIGION  
ARCELITA Compad Bacavial FIL CATHOLIC

9. NAME (First, Middle, Last) 10. NATIONALITY 11. RELIGION  
Sonny Maranan Recinto FIL CATHOLIC

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back)  
NOV. 18, 1979 CABADARAN, AGUSAN del NORTE

13. CERTIFICATE OF ATTENDANT AT BIRTH  
I hereby certify that I attended the birth of the child who was born alive at 7:30 o'clock am on the date stated above.

Signature \_\_\_\_\_ Address 241 Roosevelt Ave., CBD, Q.C.  
Name in print LWAYWAY CASTILLO Date August 13, 1987  
Title or position PHYSICIAN

14. INFORMANT  
Signature \_\_\_\_\_ Address 907 - First St., Guingona Rd  
Name in print SONNY RECINTO Butuan City  
Relationship to child Father Date 8-7-87

15a. PREPARED BY  
Signature \_\_\_\_\_ b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR  
Name in print SONNY RECINTO ATTY. EUGENIO V. COBO  
Title or position \_\_\_\_\_ City Secretary & OIC, COBO  
Date 8-7-87 Date \_\_\_\_\_

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED  
\_\_\_\_\_ AUG 21

(Important Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar.)

Local Civil Registry No. 87011773 Registration Slip No. 1

PROVINCE Metro Manila

CITY / MUNICIPALITY Quezon City

17. Weight at Birth (In grams) 6.7 lbs 2920 18. Birth Order of Child (1st, second, etc.) 5th 05

19a. Total Number of Children Born Alive 4 05 b. How many children are now living including this birth? 4 04 c. How many children were born alive but are now dead? 0 00

20. Usual Occupation Housewife 20 21. Age of the Child at this Birth 31 31

22. Usual Residence (Barangay) (City/Municipality) (Province)  
907 FIRST STREET, GUNGONA SUBD., BUTUAN CITY 02022

23. Usual Occupation Businessman 31 24. Age of the Parent at this Birth 31 31

25. Attendant at Birth (Place 'X' on appropriate answer) X 1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others \_\_\_\_\_

26. Date of Birth 08/05/87 Place of Birth QUEZON CITY Mother's Nationality PH Father's Nationality PH

NAME OF CHILD (First, Middle, Last)  
KEITH BACAVIAL RECINTO

03714-A3-702JAS-00038-BI001

BEST POSSIBLE IMAGE



1702037147020003803032010001

BREN  
07404-A87Q51Z-4

Documentary  
Stamp Tax Paid

Carmelita N. Ericta  
CARMELITA N. ERICTA  
Administrator and Civil Registrar General  
National Statistics Office