



Form No. 102
January 1993

(To be accomplished in quadruplicate)

(Copy for OCRG)

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 Registry No. 95-770
City/Municipality San Fernando

1. NAME (First) (Middle) (Last)
MARIEL LIGUTOM VILLARIASA

2. SEX 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year)
26 July 1995

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No. Street, Barangay)
South Poblacion, San Fernando, Cebu

5a. TYPE OF BIRTH b. IF MULTIPLE BIRTH, CHILD WAS
1 Single 2 Twin 3 Triplet, etc. 1 First 2 Second 3 Others, Specify

c. BIRTH-ORDER (five births and fetal deaths including this delivery) d. WEIGHT AT BIRTH
First (first, second, third, etc.) 3150 grams

6. MAIDEN NAME (First) (Middle) (Last)
Maria Flor Palar Ligutom

7. CITIZENSHIP Filipino 8. RELIGION Roman Catholic

9a. Total number of children born alive: 4 b. No. of children still living including this birth: 1 c. No. of children born alive but are now dead: 0

10. OCCUPATION Housewife 11. Age at the time of this birth: 27 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
South Poblacion, San Fernando, Cebu

13. NAME (First) (Middle) (Last)
Emalie Cumajig Villariasa

14. CITIZENSHIP Filipino 15. RELIGION Roman Catholic

16. OCCUPATION Employee 17. Age at the time of this birth: 34 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
Dec. 10, 1994 San Fernando, Cebu

19a. ATTENDANT
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 10:15 A.M. o'clock
am/pm on the date stated above.

Signature [Signature] Address San Fernando, Cebu
Name in Print Lucila L. Brigali
Title or Position [Signature] Date 3-4-95

20. INFORMANT
Signature [Signature] Address South Poblacion, San Fernando, Cebu
Name in Print Maria Flor Villariasa
Relationship to the child Mother Date 3-4-95

21. PREPARED BY
Signature [Signature]
Name in Print Lucila L. Brigali
Title or Position RHM
Date 3-4-95

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print Thelma S. Hermosa
Title or Position ICR
Date 3-4-95

For OCRG USE ONLY:
Population Reference No. 9500770

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41. 9500770

48. 1

49. 2 50. 260795

55. 22418

61. 1

62. 013150 64. 010100

68. 1 69. 1

70. 010100 72. 010100

76. 220 78. 27

81. 22418

86. 1 87. 1

88. X20 91. 34

93. 1

94. 3

Carmelita