



(Copy for OCRG)

Municipal Form No. 102  
(Revised January, 1993)  
Republic of the Philippines  
**OFFICE OF THE CIVIL REGISTRAR GENERAL**  
**CERTIFICATE OF LIVE BIRTH**  
(Fill out completely, accurately and legibly. Use ink or typewritten.  
Place X before the appropriate answer in items 2, 5a, 5b and 19a.)

REMARKS/ANNOTATION

Province Cebu Registry No. 97-17864  
City/Municipality Cebu City

1. NAME (First) (Middle) (Last)  
LANZ RAY BORNEO DELA CRUZ  
2. SEX 1 Male 2 Female  
3. DATE OF BIRTH (day) (month) (year)  
Friday Sept. 13, 1996  
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
Camp Marina Kalunasan Cebu City  
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.) 6.3 grams  
d. WEIGHT AT BIRTH

For OCRC USE ONLY  
Population Reference No.

TO BE FILED UP AT THE  
OFFICE OF THE CIVIL  
REGISTRAR

6. MAIDEN NAME (First) (Middle) (Last)  
RECHRYN ANGE BORNEO  
7. CITIZENSHIP Filipino 8. RELIGION Reneo-Costal - Born Again  
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 Housewife 11. Age at the time of this birth: 25 years  
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
Camp Marina Kalunasan, Cebu City

97 17 86 4

2

130996

22 17 8

13. NAME (First) (Middle) (Last)  
LEONIDES MONTERO DELA CRUZ  
14. CITIZENSHIP Filipino 15. RELIGION Roman Catholic  
16. OCCUPATION Traders, Market Analyst 17. Age at the time of this birth: 26 years

01 28 58

01 01 00

18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
May 28, 1996 Camp Provincial Capitol

22 0 25

19a. ATTENDANT  
1 Physician X 2 Nurse 3 Midwife  
4 Healer (Traditional Healer) 5 Others (Specify) \_\_\_\_\_

01 01 00

19b. CERTIFICATION OF BIRTH  
I hereby certify that I attended the birth of the child who was born alive at 11:15 pm o'clock am/pm on the date stated above.

22 0 25

Signature Anabelle Borneo Address Camp Marina Kalunasan, Cebu City  
Name in Print ANABELLE BORNEO Date 9-13-96  
Title or Position NURSE

22 17 8

20. INFORMANT  
Signature Rechrynn B. de la Cruz Address Camp Marina Kalunasan, Cebu City  
Name in Print Rechrynn B. de la Cruz Date \_\_\_\_\_  
Relationship to the child Mother

22 17 8

21. PREPARED BY  
Signature Rechrynn B. de la Cruz Date 11-15-96  
Name in Print Rechrynn B. de la Cruz  
Title or Position Mother  
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature Jessica L. Umhinaga  
Name in Print JESSICA L. UMHINAGA  
Title or Position REGISTRAR OFFICER II  
Date 08/15/97

22 0 26

08/18/96

22 17 8

08/15/97

06711-4D-400NTD-01771-BI001  
BEST POSSIBLE IMAGE

BReN  
02217-A96SD0T-2

*Lisa Grace S. Bersales*  
LISA GRACE S. BERSALES, Ph.D.  
National Statistician and Civil Registrar General



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