



Form No. 102  
 (Revised 1983) 3748710

REPUBLIC OF THE PHILIPPINES  
 CERTIFICATE OF LIVE BIRTH

(To be accomplished in Triplicate)

Amount Paid: P10.00 - 7/15/1991 (Fill out completely, accurately and legibly in in- or typewriter)  
 PROVINCE Misamis Occidental LOCAL CIVIL REGISTRY NO. 91-1015  
 CITY/MUNICIPALITY Oroquieta City

1. NAME (First) MICHAEL (Middle) DE LOS RAYES (Last) MONCADA

2. SEX (Place 'X' on appropriate answer) XX 1 Male 2 Female DATE OF BIRTH (Day) 14 (Month) July (Year) 1991

4. PLACE OF BIRTH (Name of hospital/institution; if not in hospital, give street/barangay) (City/Municipality) (Province)  
Misamis Occ. Prov'l. Hospital Oroquieta City Misamis Occ.

5a. TYPE OF BIRTH (Place 'X' an appropriate answer) XX 1 Single 2 Twin 3 Three or more 5b. IF MULTIPLE BIRTH, CHILD WAS  
1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last) Eugenia T. de los Reyes 7. NATIONALITY Filipino 8. RELIGION Roman Catholic

9. NAME (First) (Middle) (Last) Aselo J. Moncada 10. NATIONALITY Filipino 11. RELIGION Protestant

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back)  
 Date March 14, 1981 Place Jinones, Misamis Occ.

13. CERTIFICATE OF ATTENDANT AT BIRTH  
 I hereby certify that I attended the birth of the child who was born alive at 5:55 AM o'clock on pm on the date stated above.  
 Signature [Signature] Address Misamis Occ. Prov'l. Hospital  
 Name in print PRAXEDES TESHA P. GUILLERNA, M.D. Oroquieta City  
 Title or position Medical Officer III Date July 15, 1991

14. INFORMANT  
 Signature [Signature] Address 275 Juan Luna St., Jinones,  
 Name in print ASELO J. MONCADA Misamis Occidental  
 Relationship to child Father Date July 15, 1991

15a. PREPARED BY  
 Signature [Signature] b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR  
 Name in print ELEANOR B. MALIFIER Signature [Signature]  
 Title or position Records Officer II Name in print MARTLYN B. BARTMBAO  
 Date July 15, 1991 Title or position A.O. IV - Assistant LCR  
 Date July 15, 1991

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIES 1170

(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)

PROVINCE Misamis Occidental Local Civil Registry 9101015 Registration Status 15  
 CITY/MUNICIPALITY Oroquieta City

17. Weight of Birth (In grams) 3680 18. Birth Order of Child Ex. first, second, etc. 4th OK 20

19a. Total Number of Children Born Alive OK 22 b. How many children are now living including this birth? OK 24 c. How many children were born alive but are now dead? OK 028

20. Usual Occupation Housekeeper 21. Age at the time of this Birth 76 30 31

22. Usual Residence (City/Municipality) (Province) 275 Juan Luna St., Jinones Misamis Occ. 42077 33

23. Usual Occupation Computer Consultant 24. Age at the time of this Birth 47 47 41

25. Attendant of Birth (Place 'X' on appropriate answer) XX 1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others 43

Sex [ ] 44 Date of Birth 140791 45 Place of Birth 42093 51 Mother's Nationality [ ] 56 Father's Nationality [ ] 57

NAME OF CHILD  
 First MICHAEL M.I. R Last MONCADA  
 60 70 71

04472-6E-729FAC-00009-BI001

BEST POSSIBLE IMAGE



T729044727290000903302012001

LH400173910

BRen  
 04209-A91NE02-6

Documentary  
 Stamp Tax Paid

[Signature]  
 CARMELITA N. ERICTA  
 Administrator and Civil Registrar General  
 National Statistics Office

