



(Copy for OCRG)

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 Compostela City/Municipality Compostela Registry No. 97-666

1. NAME (First) ALISSA (Middle) TERESA (Last) ROSAL

2. SEX 1 Male 2 Female 3. DATE OF BIRTH 08 Dec 1997

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
House No., Street, Compostela, Compostela, Cebu

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 (five births and fetal deaths including this delivery) 2nd (first, second, third, etc.) d. WEIGHT AT BIRTH 3175 grams

6. MAIDEN NAME (First) Esangelina (Middle) M (Last) ARASA

7. CITIZENSHIP Filipino 8. RELIGION Catholic

9a. Total number of children born alive: 2 b. No. of children still living including this birth: 2 c. No. of children born alive but are now dead: 0

10. OCCUPATION Factory Worker 11. Age at the time of this birth: 2 years

12. RESIDENCE (House No., Street, Compostela, Compostela, Cebu)

13. NAME (First) ANG (Middle) M (Last) ROSAL

14. CITIZENSHIP Filipino 15. RELIGION Catholic

16. OCCUPATION Housewife 17. Age at the time of this birth: 23 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
9/28/96 - Maglog Parish Church, Maglog, Sanao

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 1:00 am. o'clock am/pm on the date stated above.

Signature RENIE CABATIGAN Address Cogen, Compostela, Cebu
Name in Print RENIE CABATIGAN Date December 9, 1997
Title or Position Midwife

20. INFORMANT
Signature RENIE CABATIGAN Address Cogen, Compostela, Cebu
Name in Print RENIE CABATIGAN Date December 9, 1997
Relationship to the child Mother

21. PREPARED BY
Signature MARIA TERESA C. REYES
Name in Print MARIA TERESA C. REYES Date December 9, 1997
Title or Position Asst. CR

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature MARIA TERESA C. REYES
Name in Print MARIA TERESA C. REYES Date December 9, 1997
Title or Position Asst. CR

2218-A97Z801-7

9700666

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2 081297

22186

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02 02 00

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1

3

04895-36-400JSA-00199-BI002

BEST POSSIBLE IMAGE



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E1100421098

BRn
02218-A97Z801-6

Documentary
Stamp Tax Paid

Carmelita N. Erica
CARMELITA N. ERICIA

Administratrix and Civil Registrar General
National Statistics Office

