



Form No. 102  
January 1993  
(To be accomplished in quadruplicate)  
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 Metro Manila  
City/Municipality Malabon Registry No. 88-1642

**1. NAME** (First) (Middle) (Last)  
Regnie Salubre Codera

**2. SEX**  
 1 Male  2 Female

**3. DATE OF BIRTH** (day) (month) (year)  
21, April 1998

**4. PLACE OF BIRTH** (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
Blk. 41 lot 19 Phase III E2 Kaunlaran Vill M.M.M.

**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 (first, second, third, etc.)

**d. WEIGHT AT BIRTH**  
3000 grams

For OCRG USE ONLY:  
Population Reference No.  
7502-A98HM05-1

**6. MAIDEN NAME** (First) (Middle) (Last)  
Remedios Condino Salubre

**7. CITIZENSHIP**  
Filipino

**8. RELIGION**  
Roman Catholic

**9a. Total number of children born alive:** \_\_\_\_\_

**b. No. of children still living including this birth:** 1

**c. No. of children born alive but are now dead:** 0

**10. OCCUPATION**  
Housekeeper

**11. Age at the time of this birth:** 29 years

**12. RESIDENCE** (House No., Street, Barangay) (City/Municipality) (Province)  
Blk. 41 lot 19 Phase III E2 Kaunlaran Vill M.M.M.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41  
98011642

48  
1

49 50  
2 2/0498

58  
75028

61  
1

62 64  
01 3000

**13. NAME** (First) (Middle) (Last)  
Nestor Colena Codera

**14. CITIZENSHIP**  
Filipino

**15. RELIGION**  
Roman Catholic

**16. OCCUPATION**  
Sea Man

**17. Age at the time of this birth:** 38 years

68 69  
1 1

70 72 74  
01 01 00

76 78  
220 09

81  
75028

86 87  
1 1

88 91  
991 38

**18. DATE AND PLACE OF MARRIAGE OF PARENTS** (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)  
October 26, 1996 / Holy Trinity Chapel Kalocan

**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 8:50 AM o'clock am/pm on the date stated above.

Signature \_\_\_\_\_ Address Blk. 41 lot 7 Phs. III Kaunlaran Vill, M.M.M.  
Name in Print Grace Chelo P. Almazan  
Title or Position Registered Midwife Date April 21, 1998

**20. INFORMANT**

Signature \_\_\_\_\_ Address Blk. 41 lot 19 Phs. III Kaunlaran Vill M.M.M.  
Name in Print Remedios Codera  
Relationship to the child Mother Date April 21, 1998

**21. PREPARED BY**

Signature \_\_\_\_\_  
Name in Print Grace Chelo Almazan  
Title or Position Midwife  
Date April 21, 1998

**22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR**

Signature \_\_\_\_\_  
Name in Print MARISSA T. GONZALES  
Title or Position CIVIL REGISTRAR  
Date 27 April 1998

1490

83  
1 10 2456

84  
3 75010

042995

02981-94-009EAA-00117-BI002

BEST POSSIBLE IMAGE



T009029810090011702292008002

BReN  
07502-A98HM05-5

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