Municipal Form No. 102
(Revised 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: Lanao del Norte
City/Municipality: Kapatagan
Registry No. 95-1191

For OCRG USE ONLY
Population Reference No. 3SC-A05X013

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41 9 5 1 1 9 1

CHILD

1. NAME: (First) BEVERLY (Middle) PAGSOL (Last) SALAGUSTE
2. SEX: ___ 1 Male X 2 Female
3. DATE OF BIRTH (day, month, year): 12 November 1995
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): (Home) Tagpi-lo, Kapatagan, Lanao del Norte
5a. TYPE OF BIRTH: X 1 Single ___ 2 Twin ___ 3 Triplet, etc.
b. IF MULTIPLE BIRTH, CHILD WAS: ___ 1 First ___ 2 Second ___ 3 Others, Specify
c. BIRTH ORDER (Give a letter and final digit including this delivery): 10th (first, second, third, etc.)
d. WEIGHT AT BIRTH: 3175 grams

43 1

MOTHER

6. MAIDEN NAME: (First) AVELINA (Middle) STARES (Last) PAGSOL
7. CITIZENSHIP: Filipino
8. RELIGION: Seventh Day Adventist
9a. Total number of children born alive: 10
b. No. of children still living including this birth: 10
c. No. of children born alive but are now dead: 0
10. OCCUPATION: Housekeeper
11. Age at the time of this birth: 50 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): Tagpi-lo, Kapatagan, Lanao del Norte

FATHER

13. NAME: (First) BERNARDO (Middle) PONCE (Last) SALAGUSTE
14. CITIZENSHIP: Filipino
15. RELIGION: Seventh Day Adventist
16. OCCUPATION: Fisherman
17. Age at the time of this birth: 53 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.): July 29, 1967-Gelumbo, Mis.Occ.

19a. ATTENDANT: ___ 1 Physician ___ 2 Nurse X 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 3:30 pm/am on the date stated above.
Signature: [signature]
Name in Print: ANNA B. ESCALANTE
Title or Position: R.H.M.
Address: Tagpi-lo, Kapatagan, Lanao del Norte
Date: November 12, 1995

20. INFORMANT
Signature: Avelina Salaguste
Name in Print: AVELINA SALAGUSTE
Relationship to Child: Mother
Address: Tagpi-lo, Kapatagan, Lanao del Norte
Date: November 12, 1995

21. PREPARED BY
Signature: [signature]
Name in Print: ANNA B. ESCALANTE
Title or Position: R.H.M.
Date: November 24, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: DALE D. FUENTES
Title or Position: Mun. Civil Registrar
Date: 11-24-95

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43 3 11-24-95

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CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority