



(Copy for OCRG)

Municipal Form No. 102 (To be accomplished in quadruplicate)
(Revised January 1993)

Republic of the Philippines
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 BOHOL Registry No. 55-94
City/Municipality PRES. C.P. GARCIA

1. NAME (First) (Middle) (Last)
HEZEL ERITA LIASIA

2. SEX X 1 Male X 2 Female

3. DATE OF BIRTH (day) (month) (year)
18 JAN. 1995

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) (City/Municipality) (Province)
AGUINING, PRES. C. P. GARCIA, BOHOL

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 (live births and fetal deaths including this delivery) FIRST (first, second, third, etc.)

d. WEIGHT AT BIRTH 3175 grams

6. MAIDEN NAME (First) (Middle) (Last)
MERCEDES CRUZ ERITA

7. CITIZENSHIP FILIPINO

8. RELIGION R. CATHOLIC

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: 22 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
AGUINING, PRES. C.P. GARCIA, BOHOL

13. NAME (First) (Middle) (Last)
WALRITO ALLARCE LIASIA

14. CITIZENSHIP FILIPINO

15. RELIGION R. CATHOLIC

16. OCCUPATION SECURITY

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.)
JANUARY 17, 1994-CEBU CITY

19a. ATTENDANT
 1 Physician 2 Nurse X 3 Midwife
 4 Healer (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 3:00 o'clock am/pm on the date stated above.

Signature [Signature]
Name in Print ELIZABETH YANAG
Title or Position MURAL MIDWIFE
Date JANUARY 18, 1995

20. INFORMANT
Signature [Signature] Address AGUINING, PRES. C.P. GARCIA, BOHOL
Name in Print ELIZABETH YANAG
Relationship to the child REGISTRAR
Date JANUARY 31, 1995

21. PREPARED BY
Signature [Signature]
Name in Print ERLITA D. LEYSIS
Title or Position DEP CLERK
Date JANUARY 31, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature [Signature]
Name in Print ANGELA D. OCON
Title or Position ICR
Date JANUARY 31, 1995

REMARKS/ANNOTATION

FOR OCRG USE ONLY: Population Reference No. 123A95B109

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41 9 5 0 1 0 0 9 4

48 1

49 50 2 1 8 0 1 9 5

56 1 2 3 5 1

61 1

62 64 0 1 3 1 7 5

68 69 1 1

70 72 74 0 1 0 1 0 0

76 78 1 2 0 2 2

81 1 2 3 5 1

86 87 1 1

88 91 4 4 1 2 3

93 1 0 1 1 7 9 4
2 2 1 7 8
0 1 3 1 8 5

94 3

04227-HF-400ADT-00072-BI001

BEST POSSIBLE IMAGE

BReN

01235-A95BJ01-2

[Signature]
CARMELITA N. ERICTA

Administrator and Civil Registrar General