



Philippine Form No. 102
Revised 1983

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

(To be accomplished in triplicate)

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. CE-2075

CITY/MUNICIPALITY Cebu City

1. NAME (First) (Middle) (Last)
BRACELINE MAREE MARIE DA SILVA JAO

2. SEX (Place 'X' on appropriate answer)
1 Male X 2 Female

3. DATE OF BIRTH (Day) (Month) (Year)
27 October 1992

4. PLACE OF BIRTH (Name of Hospital, institution; if not in hospital, give street/barangay)
Cebu Doctors' Hospital (City/Municipality) Cebu City (Province) Cebu

5a. TYPE OF BIRTH (Place 'X' on appropriate answer):
X 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)
Maria Jose Christiana Acobedo DA SILVA

7. NATIONALITY Indonesian 8. RELIGION R. Catholic

9. NAME (First) (Middle) (Last)
Jerome Marico Gloria Jao

10. NATIONALITY Filipino 11. RELIGION R. Catholic

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment on the back)
August 8, 1992, Lahug, Cebu City

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 12:50 PM on the date stated above.
Signature [Signature] Address Cebu Doctors' Hospital
Name in print SONIA S. GUAZIDA, M.D. Omnia Blvd., Cebu City
Title or position Attending Physician Date Oct. 27, 1992

14. INFORMANT
Signature [Signature] Address 821-15 Haeipit
Name in print JEROME MARICO JAO Talamban, Cebu City
Relationship to child Father Date Oct. 27, 1992

15a. PREPARED BY
Signature [Signature] Name in print Man D. Montorio
Title or position Medical records clerk Date Oct. 27, 1992

15b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature [Signature] Name in print INDA A. NUNES
Title or position CLERK III Date OCT-27-1992

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

(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)

RESERVE FOR BINDING

PROVINCE Cebu Local Civil Registry No. 7702075 Status 15

CITY/MUNICIPALITY Cebu City

17. Weight at Birth (In grams) 3025 16 17 18

18. Birth Order of Child Ex. first, second, etc. 1st 19 20

19a. Total Number of Children Born Alive 01 21 22

19b. How many children are now living including this birth? 01 23 24

19c. How many children were born alive but are now dead? 00 25 26

20. Usual Occupation Student 27 28

21. Age at the time of this Birth 23 29 30

22. Usual Residence (Barangay) Talamban (City/Municipality) Cebu City (Province) Cebu 31 32

23. Usual Occupation Student 33 34

24. Age at the time of this Birth 20 35 36

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

Sex 44 45 Date of Birth 27/10/92 46 47 Place of Birth CEBU 48 49 Mother's Nationality 50 51 Father's Nationality 52 53

NAME OF CHILD
First BRACELINE M.I. MAREE Last JAO

05669-37-999DPC-01893-BI001

BEST POSSIBLE IMAGE



T08905669990189307102015001

RJ000240668

BReN
02217-A92VT05-4

Documentary
Stamp Tax Paid

Lisa Grace S. Bersales
LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

