



(Copy for CCRG)

Municipal Form No. 102
 Revised January 1995
 (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.)

Province <u>Cebu</u> City/Municipality <u>Cebu City</u>	Registry No. <u>95-37829</u>	REMARKS/ANNOTATION
1. NAME (First) <u>RENEE JAY</u> (Middle) <u>NAVARRO</u> (Last) <u>RASONABLE</u>		
2. SEX <u>X</u> 1 Male _____ 2 Female _____	3. DATE OF BIRTH (Day) <u>21</u> (Month) <u>December</u> (Year) <u>1995</u>	REGISTER USE ONLY Registrar Reference No.
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Cebu Puer. Center & Mat. House Inc. Cebu City Cebu</u>		
5a. TYPE OF BIRTH <u>X</u> 1 Single _____ 2 Twin _____ _____ 3 Triplet, etc. _____	5b. IF MULTIPLE BIRTH, CHILD WAS _____ 1 First _____ 2 Second _____ _____ 3 Others Specify _____	REGISTER USE ONLY Registrar Reference No.
6. MAIDEN NAME (First) <u>Annabella</u> (Middle) <u>Renejane</u> (Last) <u>Navarro</u>	7. CITIZENSHIP <u>Filipino</u>	
8a. Total number of children born alive: <u>6</u>	8b. No. of children living including this birth: <u>6</u>	REGISTER USE ONLY Registrar Reference No.
8c. No. of children born alive but are now dead: <u>0</u>	8d. No. of children born alive but are now dead: <u>0</u>	
9. OCCUPATION <u>Municipal Treasurer</u>	10. Age at the time of this birth: <u>37</u> years	REGISTER USE ONLY Registrar Reference No.
11. RESIDENCE (House No., Street, Barangay) <u>Cambuntan,</u> (City/Municipality) <u>Carcar</u> (Province) <u>Cebu</u>	12. RESIDENCE (House No., Street, Barangay) <u>Cambuntan,</u> (City/Municipality) <u>Carcar</u> (Province) <u>Cebu</u>	
13. NAME (First) <u>Rizalio</u> (Middle) <u>Y. Villarino</u> (Last) <u>Rasonable</u>	14. CITIZENSHIP <u>Filipino</u>	REGISTER USE ONLY Registrar Reference No.
15. RELIGION <u>Roman Catholic</u>	16. OCCUPATION <u>Laborer</u>	
17. Age at the time of this birth: <u>39</u> years		REGISTER USE ONLY Registrar Reference No.
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>November 9, 1980 Carcar, Cebu</u>		
19a. ATTENDANT <u>X</u> 1 Physician _____ 2 Nurse _____ _____ 3 Midwife _____ 4 Healer (Traditional Midwife) _____ 5 Others (Specify) _____	19b. CERTIFICATION OF BIRTH (I hereby certify that) attended the birth of the child who was born alive at <u>12:00am</u> o'clock am/pm on the date stated above.	REGISTER USE ONLY Registrar Reference No.
Signature <u>FARINA SABADO, M.D.</u> Address <u>Cebu Puer. Center & Mat. House Inc., Cebu City</u> Name in Print _____ Title or Position <u>Physician</u> Date <u>Dec. 21, 1995</u>	Signature _____ Address <u>Cambuntan, Carcar, Cebu</u> Name in Print <u>RIZALIO Y. RASONABLE</u> Relationship to the child <u>father</u> Date <u>Dec. 21, 1995</u>	
20. INFORMANT Signature _____ Address _____ Name in Print _____ Relationship to the child _____ Date _____	21. PREPARED BY Signature _____ Address _____ Name in Print <u>Sonia M. Cano</u> Title or Position <u>clerk</u> Date <u>Dec. 21, 1995</u>	REGISTER USE ONLY Registrar Reference No.
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature _____ Address _____ Name in Print <u>WIDA A. RUIZ</u> Title or Position <u>Clerk III</u> Date <u>January 10, 1996</u>	REGISTER USE ONLY Registrar Reference No.	