

CPDR-0008

Metropolitan 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 15a.)

Province <u>Cebu</u>		Registry No. <u>20094331</u>
City/Municipality <u>MANDAUE</u>		
1. NAME (First) (Middle) (Last) <u>Samantha Kassandra Aguelo Tagalog</u>		
2. SEX <input type="checkbox"/> 1 Male <input checked="" type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>18 June 2009</u>
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Eversley Childs Sanitarium, Jagobiao, Mandaue City, Cebu</u>		
5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify _____
c. BIRTH ORDER (live births and total deaths including this delivery) <u>Second</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3,800</u> grams
6. MOTHER'S NAME (First) (Middle) (Last) <u>Renalyn Mandaue Aguelo</u>		
7. CITIZENSHIP <u>Filipino</u>		B. RELIGION <u>Roman Catholic</u>
9a. Total number of children born alive: <u>2</u>	b. No. of children still living including this birth: <u>2</u>	c. No. of children born alive but are now dead: <u>0</u>
10. OCCUPATION <u>None</u>		11. Age at the time of this birth: <u>25</u> years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Public Market, Cansaga, Consolacion, Cebu</u>		
13. NAME (First) (Middle) (Last) <u>Jerome Noquera Tagalog</u>		
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>
16. OCCUPATION <u>H.R. Assistant</u>		17. Age at the time of this birth: <u>25</u> years
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>June 28, 2004 - Sto. Niño Parish, Paknaan, Mandaue City, Cebu</u>		
19a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input checked="" type="checkbox"/> 2 Nurse <input checked="" type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Midot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify) _____		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>9:00 AM</u> o'clock am/pm on the date stated above.		
Signature <u>Roselyn Capistrano</u> Name in Print <u>ROSELYN L. CAPISTRANO, MD, FPOGS</u> Title or Position <u>OB-Gynecologist</u>		Address <u>Eversley Childs Sanitarium Jagobiao, Mandaue City, Cebu</u> Date <u>June 18, 2009</u>
20. INFORMANT		
Signature <u>Renalyn A. Tagalog</u> Name in Print <u>RENALYN A. TAGALOG</u> Relationship to the child <u>Mother</u>		Address <u>Public Market, Cansaga Consolacion, Cebu</u> Date <u>June 18, 2009</u>
21. PREPARED BY		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature <u>Priscilla P. Bacayo</u> Name in Print <u>PRISCILLA P. BACAYO, RN</u> Title or Position <u>Nurse II</u> Date <u>June 18, 2009</u>		Signature <u>Carmelita N. ERICTA</u> Name in Print <u>CARMELITA N. ERICATA</u> Title or Position <u>City Civil Registrar</u> Date <u>JUL 16 2009</u>

REMARKS/ANNOTATION

FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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