



Municipal Form No. 102
(Revised January 2007)

to be accomplished in quadruplicate using black ink)

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

Province CEBU		Registry No. 2013 03839	
City/Municipality CEBU CITY			
1. NAME (First) CLIRT (Middle) VINCENT (Last) CABALLES PAGE			
2. SEX (Male / Female) Male		3. DATE OF BIRTH (Day) 26 (Month) JAN (Year) 2013	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) Agnes Birthing Home Clinic, Lahug Cebu City Cebu (City/Municipality) (Province)			
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) Single		5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) 1st	5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.) 1st
6. WEIGHT AT BIRTH 2790 grams			
7. MAIDEN NAME (First) Michelle (Middle) Dienes (Last) Caballes			
8. CITIZENSHIP Filipino		9. RELIGION/RELIGIOUS SECT R. Catholic	
10a. Total number of children born alive 1	10b. No. of children still living including this birth 1	10c. No. of children born alive but are now dead 0	11. OCCUPATION None
12. AGE at the time of this birth (completed years) 18			
13. RESIDENCE (House No., St., Barangay) 207-6 Cor. Ave. Kamputhaw (City/Municipality) Cebu City (Province) Cebu (Country) Philippines			
14. NAME (First) Riesar (Middle) Maraon (Last) Page			
15. CITIZENSHIP Filipino		16. RELIGION/RELIGIOUS SECT R. Catholic	
17. OCCUPATION None		18. AGE at the time of this birth (completed years) 20	
19. RESIDENCE (House No., St., Barangay) 207-6 Cor. Ave. Kamputhaw (City/Municipality) Cebu City (Province) Cebu (Country) Philippines			
MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)			
20a. DATE (Month) (Day) (Year) Not Married		20b. PLACE (City / Municipality) (Province) (Country) N/A	
21a. ATTENDANT 1 Physician ___ 2 Nurse <input checked="" type="checkbox"/> 3 Midwife ___ 4 Hilot (Traditional Birth Attendant) ___ 5 Others (Specify) ___			
21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.) I hereby certify that I attended the birth of the child who was born alive at 11:40 a.m. am/pm on the date of birth specified above.			
Signature Agnes D. Guillermo Name in Print Agnes D. Guillermo Title or Position Reg. Midwife		Address Lahug Cebu City Date Feb. 3, 2013	
22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief. Signature Michelle D. Caballes Name in Print Michelle D. Caballes Relationship to the Child Mother Address 207-6 Cor. Ave. Kamputhaw Date Cebu City		23. PREPARED BY Signature Agnes D. Guillermo Name in Print Agnes D. Guillermo Title or Position Reg. Midwife Date Feb. 3, 2013	
24. RECEIVED BY Signature Ridolito P. Ybanez Name in Print Ridolito P. Ybanez Title or Position Administrative Aide I Date FEB 04 2013		25. REGISTERED BY THE CIVIL REGISTRAR Signature Oscar B. Mele Name in Print Oscar B. Mele Title or Position Asst. City Civil Registrar Date FEB 04 2013	
REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)			
TO BE FILLED-UP AT THE OFFICE OF THE CIVIL REGISTRAR 8 9 11 13 15 16 17 19			

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BEST POSSIBLE IMAGE



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Stamp Tax Paid

Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General
Philippine Statistics Authority

