



Form No. 102 (Revised 1983)

REPUBLIC OF THE PHILIPPINES CERTIFICATE OF LIVE BIRTH

(To be accomplished in triplicate)

(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. 92-1814 CITY/MUNICIPALITY Cebu City

1. NAME (First) Middle (Last) JUNETTE ANNE GIMENA CASTILLO 2. SEX (Place 'X' on appropriate answer) 1 Male X 2 Female 3. DATE OF BIRTH (Day) (Month) (Year) 25 June 1992

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

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) X 1 Single 2 Twin 3 Three or more b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last) Janet Albino Gimena 7. NATIONALITY filipino 8. RELIGION R. Catholic

9. NAME (First) (Middle) (Last) Cipriano Camiguing Castillo, Jr. 10. NATIONALITY filipino 11. RELIGION R. Catholic

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back) March 28, 1990, Barili, Cebu

13. CERTIFICATE OF ATTENDANT AT BIRTH I hereby certify that I attended the birth of the child who was born alive at 3:25 P.M. on the date stated above. Signature: [Signature] Address: Cebu Doctors' Hospital Name in print: CHARISSE R. TAN, M.D. Title or position: Attending Physician Date: June 25, 1992

14. INFORMANT Signature: [Signature] Address: 13-B Labucay St. Name in print: JANETTE CASTILLO Relationship to child: mother Date: June 25, 1992

15a. PREPARED BY Signature: [Signature] Name in print: Dep. D. Ministerio Title or position: medical records clerk Date: June 25, 1992 b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR Signature: [Signature] Name in print: NIDA A. NUNEZ Title or position: CLERK III Date: DATE REC'D. 7/12/92

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED 2890

(Important: Informant should also provide information for items 17 to 25. The cada boxes are to be filled out at the Office of the Local Civil Registrar)

RESERVE FOR BINDING

PROVINCE Cebu LOCAL CIVIL REGISTRY NO. 9201814 STATUS 8 15 CITY/MUNICIPALITY Cebu City

17. Weight at Birth (In grams) 3380 18. Birth Order of Child Ex. first, second, etc. 1st.

19a. Total Number of Children Born Alive 01 19b. How many children are now living including this birth? 01 19c. How many children were born alive but are now dead? 00

20. Usual Occupation Businesswoman 21. Age at the time of this Birth 27

22. Usual Residence (Barangay) Mabolo (City/Municipality) Cebu City (Province) Cebu

23. Usual Occupation Doctor 24. Age at the time of this Birth 34

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

Sex 2 Date of Birth 7/20/92 Place of Birth 27177 Mother's Nationality 58 Father's Nationality 57

NAME OF CHILD First M.I. Last JUNETTE ANNE G CASTILLO