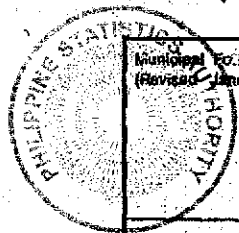


(Copy for OCRG)



Municipal 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 19a.)

REMARKS/ANNOTATION

Province Cebu Registry No. 94-474
 City/Municipality Malibon

Delayed Registration

CHILD
 1. NAME (First) (Middle) (Last)
ANA FLORESA BEJASA PABEO
 2. SEX 1 Male 2 Female
 3. DATE OF BIRTH (day) (month) (year)
04 May 1994
 4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)
 House No., Street, Barangay)
Bagha, Malibon, Cebu
 5a. TYPE OF BIRTH 1 Single 2 Twin 3 Triplet, etc.
 b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Others, Specify

For OCRG-USE ONLY:
 Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

MOTHER
 6. MAIDEN NAME (First) (Middle) (Last)
Elizabeth Bejasa
 7. CITIZENSHIP Filipino 8. RELIGION R.C.
 9a. Total number of children born alive: 3
 b. No. of children still living including this birth: 3
 c. No. of children born alive but are now dead: 0
 10. OCCUPATION Housewife 11. Age at the time of this birth: 32 years
 12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Bagha, Malibon, Cebu

41 9400474
 48 2
 49 50 2 040594
 56 22335

FATHER
 13. NAME (First) (Middle) (Last)
Esquivil Eshlan Jr.
 14. CITIZENSHIP Filipino 15. RELIGION R.C.
 16. OCCUPATION Labourer 17. Age at the time of this birth: 31 years

61 1
 62 64 033181
 68 69 7 1

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
December 21, 1989 Malibon, Cebu
 19a. ATTENDANT 1 Physician 2 Nurse 3 Midwife
 4 Midol (Traditional Midwife) 5 Others (Specify)

70 72 74 03 03 00
 76 79 220 32

19b. CERTIFICATION OF BIRTH
 I hereby certify that I attended the birth of the child who was born alive at 7:00 P.M. o'clock am/pm on the date stated above.
 Signature _____ Address Tanong, Malibon, Cebu
 Name in Print MARTA TAIT
 Title or Position Traditional Midwife Date May 4, 1994

81 22335
 86 87 1 1

20. INFORMANT
 Signature Esquivil Pablo Address Bagha, Malibon, Cebu
 Name in Print ESQUIVIL PABLO SR.
 Relationship to the child Grandfather Date June 27, 1994

88 91 999 311
122/89

21. PREPARED BY
 Signature Clayton
 Name in Print MARTA C. MAYITO
 Title or Position Casual Clerk
 Date June 27, 1994
 22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
 Signature _____
 Name in Print HONORABLE GABOR
 Title or Position MOA
 Date June 27, 1994

93 1 **0810**
22305
 94 4 062794

06692-34-400CMC-01926-BI001

BReN [02233-A94K401-8]

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