



Municipal Form No. 102
Revised 1988)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

(To be accomplished in triplicate)

LATE REGISTRAR

PROVINCE MANILA LOCAL CIVIL REGISTRY NO. 403-482

CITY/MUNICIPALITY MANILA

1. NAME (First) DIAN KRISSEL (Middle) FRANCISCO (Last) NEGAR

2. SEX (Place 'X' on appropriate answer) 1 Male 2 Female

3. DATE OF BIRTH (Day) 7 (Month) June (Year) 1990

4. PLACE OF BIRTH (Name of Hospital/Institution: if not in/hospital, give street/barangay) Hospital ng Maynila Manila (City/Municipality) (Province)

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) ANILIN (Middle) FRANCISCO (Last) NEGAR

7. NATIONALITY FIL. 8. RELIGION INC.

9. NAME (First) (Middle) (Last) 10. NATIONALITY 11. RELIGION

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back).

13. CERTIFICATE OF ATTENDANT AT BIRTH
(I hereby certify that I attended the birth of the child who was born alive at 6:30 o'clock am p.m. on the date stated above.)

Signature [Signature] Address HOSPITAL NG MANILA
Name in print DR. JOSE RIVERA, M.D. PHS - QUINING AVE.
Title or position MD. PHYSICIAN Date JULY 6, 1990

14. INFORMANT
Signature [Signature] Address 2164 P. Dandan St.,
Name in print ANILIN F. NEGAR PAOY CITY
Relationship to child MOTHER Date July 6, 1990

15a. PREPARED BY [Signature] b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature [Signature] Signature MARINO D. PEREZ
Name in print J. N. ABILLOS Name in print City Seal Registrar
Title or position CLERK Title or position City Cert. Head - II
Date JULY 8, 1990 / AM Date JULY 8, 1990 2630

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

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

PROVINCE MANILA Local Civil Registry No. 9000987 Status [X]

CITY/MUNICIPALITY MANILA

17. Weight at Birth 3 lbs. 2 oz (in grams) 2700 18. Birth Order of Child (first, second, etc.) 1st

19a. Total Number of Children Born Alive 1 b. How many children are now living including this birth? 1 c. How many children were born alive but are now dead? 0

20. Usual Occupation Housewife 21. Age at the time of this Birth 22

22. Usual Residence (Barangay) 2164 P. Dandan St., PAOY CITY (City/Municipality) (Province) MANILA

23. Usual Occupation [Signature] 24. Age at the time of this Birth 47

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

RESERVE FOR BINDING

Sex M Date of Birth 30 20 90 Place of Birth 30 20 90 Mother's Nationality 1 Father's Nationality 1

NAME OF CHILD
First DIAN KRISSEL M.I. [Signature] Last NEGAR

"PAKITA SA MUNDO, UMAASENSO NA TAYO"

03541-FG-999GGA-00069-B1001

BReN
03910-A90M705-7

[Signature]
CARMELITA N. ERICTA
Administrator and Civil Registrar General
National Statistics Office



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