

(Copy for OCRG)

Municipal Form No. 102  
(Revised January 1993)

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

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.)

Province Bohol Registry No. 99-165  
City/Municipality Jagna

1. NAME (First) (Middle) (Last)  
**FRANCES IRA FLORES BERMOY**

2. SEX X 1 Male X 2 Female  
3. DATE OF BIRTH (day) (month) (year)  
19 March 1999

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
**TEODORA B. GALAGAR DISTRICT HOSPITAL - Jagna, Bohol**

5a. TYPE OF BIRTH X 1 Single        2 Twin  
       3 Triplet, etc. b. IF MULTIPLE BIRTH, CHILD WAS  
       1 First        2 Second  
       3 Others, Specify       

c. BIRTH ORDER (live births and fetal deaths including this delivery)  
3rd (first, second, third, etc.) d. WEIGHT AT BIRTH  
9 lbs. grams

6. MAIDEN NAME (First) (Middle) (Last)  
**MIRAFLORE LLIDO FLORES**

7. CITIZENSHIP Filipino 8. RELIGION Roman Catholic

9a. Total number of children born alive: 03 b. No. of children still living including this birth: 03 c. No. of children born alive but are now dead: 0

10. OCCUPATION Housekeeping 11. Age at the time of this birth: 27 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
Tejaro, Jagna, Bohol

13. NAME (First) (Middle) (Last)  
**RAMON LIM BERMOY**

14. CITIZENSHIP Filipino 15. RELIGION Roman Catholic

16. OCCUPATION Nurse 17. Age at the time of this birth: 31 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)

August 02, 1993 - Tagbilaran City

19a. ATTENDANT

X 1 Physician        2 Nurse        3 Midwife  
       4 Hilot (Traditional Midwife)        5 Others (Specify)       

19b. CERTIFICATION OF BIRTH

I hereby certify that I attended the birth of the child who was born alive at 3:55 AM. o'clock am/pm on the date stated above.

Signature MILA A. CABERAS, M.D.  
Name in Print Medical Officer III  
Title or Position

Address TBGRH - Jagna, Bohol  
Date March 19, 1999

20. INFORMANT

Signature Ramon L. Bermo  
Name in Print RAMON L. BERMOY  
Relationship to the child Father

Address Jagna, Bohol  
Date March 19, 1999

21. PREPARED BY:

Signature Carmelita O. Abrea  
Name in Print CARMELITA O. ABREA  
Title or Position Clerk I  
Date March 19, 1999

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature Francisco B. Belarmino  
Name in Print Francisco B. Belarmino  
Title or Position Off. Civil Registrar  
Date March 19, 1999

For OCRG USE ONLY:  
Population Reference No.

TO BE FILLED UP AT THE  
OFFICE OF THE CIVIL  
REGISTRAR

41  
9 9 0 0 1 6 5

48  
1

49 50  
2 1 9 0 3 9 9

56  
1 2 2 5 2

61  
1

62 64  
0 3 4 0 8 2

68 69  
1 1

70 72 74  
0 3 0 3 0 0

76 79  
2 2 0 2 7

81  
1 2 2 5 2

86 87  
1 1

88 91  
0 6 6 3 1

93  
1 08/02/93  
12427

94  
1 03/19/99

07156-EB-400MCS-01808-BI001

BEST POSSIBLE IMAGE



T400071564000180808052019001

ON000038380

BReN

01225-A99FK01-4

Documentary  
Stamp Tax Paid

CLAIRE DENNIS S. MAPA, Ph. D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

