



Municipal Form No. 102
(Revised 1988)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(To be accomplished in triplicate)

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

JAN 13 1993

93-00374

PROVINCE _____ LOCAL CIVIL REGISTRY NO. _____
CITY/MUNICIPALITY Zamboanga City

1. NAME (First) (Middle) (Last)
Seung Mentiza Chun

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

3. DATE OF BIRTH (Day) (Month) (Year)
07 January 1993

4. PLACE OF BIRTH (Name of Hospital/Institution; if not in hospital, give street/barangay) (City/Municipality) (Province)
ZABC Community Medical Center, 247 San Jose Road, Zamboanga City

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 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)
Bersabi Castro Mentiza

7. NATIONALITY Filipino

8. RELIGION Roman Catholic

9. NAME (First) (Middle) (Last)
Yong Ung Kim Chun

10. NATIONALITY Korean

11. RELIGION Protestant

12. DATE AND PLACE OF MARRIAGE OF PARENTS (important if not applicable, fill Affidavit of Acknowledgment at the back).
September 11, 1980 At Dipolog City

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 3:45 o'clock a.m./p.m. on the date stated above.

Signature [Signature] Address 00 ZABC Community Medical Center
Name in print Suzette Mentiza, M.D. 247 San Jose Road, Z.C.
Title or position Obstetrician Date January 08, 1993

14. INFORMANT
Signature [Signature] Address 9-E Sta Nina, San Jose
Name in print Bersabi N. Chun Zamboanga City
Relationship to child Mother Date January 09, 1993

15a. PREPARED BY
Signature [Signature] b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Name in print Vilma D. Rivero Signature [Signature]
Title or position Admitting Clerk Name in print OPHELIA C. GAYANLO
Date January 11, 1993 Title or position City Government Registrar Head III
(Civil Registrar) Date JAN 13 1993

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT _____ b. DATE WHEN INFORMATION WAS SUPPLIED 9/21

(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 _____ Local Civil Registry No. 9300374 Registration Status 1
CITY/MUNICIPALITY _____

17. Weight at Birth (in grams) 3690 18. Birth Order of Child (first, second, etc.) 03

19a. Total Number of Children Born Alive 03 b. How many children are now living including this birth? 03 c. How many children were born alive but are now dead? 00

20. Usual Occupation 280 21. Age at the time of this Birth 32

22. Usual Residence (Barangay) (City/Municipality) (Province)
9-E Sta Nina, San Jose, Zamboanga City

23. Usual Occupation 412 24. Age at the time of this Birth 46

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

Sex 1 Date of Birth 070193 Place of Birth 73320 Mother's Nationality 1 Father's Nationality 0

NAME OF CHILD
First M.I. Last
SEUNG N CHUN

"IPAKITA SA MUNDO, UMAASENSO NA TAYO".

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PURSUANT TO THE ORDER DATED APRIL 11, 2012 RENDERED BY JUDGE PORFERIO E. MAH OF THE REGIONAL TRIAL COURT, 9TH JUDICIAL REGION, BRANCH 8, DIPLOG CITY, UNDER SP. PROC. NO. R-4335, THE NAME OF THE PETITIONER IN HIS CERTIFICATE OF LIVE BIRTH IS HEREBY ORDERED CHANGED FROM SEUNG N. CHUN TO "SEUNG PHILIP N. CHUN".

MS. EDITHA R. ORCILLADOR
Chief, Document Management Division

CSM

08130-29-724MMA-00133-BI001

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



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