(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.)

Province: METRO MANILA
City/Municipality: PARAÑAQUE
Registry No. 96-6486

CHILD

1. NAME (First) HELEN GRACE (Middle) FERRERAS (Last) ORACION
2. SEX: ___ 1 Male X 2 Female
3. DATE OF BIRTH (day) 11 (month) (year) SEPT. 1996
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): EUROPALOT-D DR. A. SANTOS AVE CAXAYAN AVE PARAÑAQUE M.M.
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) (first, second, third, etc.): 2nd
d. WEIGHT AT BIRTH: 2948 grams

MOTHER

6. MAIDEN NAME (First) NIDA (Middle) E. (Last) FERRERAS
7. CITIZENSHIP: FILIPINO
8. RELIGION: ROMAN CATHOLIC
9a. Total number of children born alive: 2
b. No. of children still living including this birth: 2
c. No. of children born alive but are now dead: 1
10. OCCUPATION: HOUSEKEEPER
11. Age at the time of this birth: 29 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): BLK 4 LOT 7 DÑA. MATILDE SUBD. PHASE 3 GATCHALIAN PARAÑAQUE

FATHER

13. NAME (First) RODOLFO (Middle) E. (Last) ORACION
14. CITIZENSHIP: FILIPINO
15. RELIGION: ROMAN CATHOLIC
16. OCCUPATION: LABORER
17. Age at the time of this birth: 22 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
APRIL 13 1996 PARAÑAQUE M.M.

19a. ATTENDANT: ___ 1 Physician ___ 2 Nurse X 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 6:20 o'clock am/pm on the date stated above.
Signature: [signature]
Name in Print: ELIZABETH SAPLAD
Title or Position: REG. MIDWIFE
Address: 1093 TOLENTINO ST. DÑA GATCHALIAN SUBD. PQUE
Date: SEPT. 30, 1996

20. INFORMANT
Signature: [signature] ORACION
Name in Print: NIDA ORACION
Relationship to the child: MOTHER
Address: BLK 4 LOT 7 DÑA. MATILDE SUBD. PHASE 3 GATCHALIAN PARAÑAQUE
Date: SEPT. 30, 1996

21. PREPARED BY
Signature: [signature]
Name in Print: ELIZABETH SAPLAD
Title or Position: REG. MIDWIFE
Date: SEPT 30, 1996

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: MA. CRISTINA V. GONZALES
Title or Position: CIVIL REGISTRATION CLERK II
Date: [illegible]

REMARKS/ANNOTATION

For OCRG USE ONLY: Population Reference No. 7604A96 TB02-6

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

9 6 0 6 4 8 6

48: 1

49: 2 50: 1 1 0 9 9 6

56: 7 6 0 4 2

61: 1

62: 0 2 64: 2 9 4 8

68: 1 69: 1

70: 0 2 72: 6 2 74: 0 1

76: 2 2 0 79: 2 2

81: 7 6 0 4 2

4220

86: 1 87: 1

88: 999 91: 22

93: 1 04 03 1996

76042 4220

94: 3 09 30 1996

06355-63-088LRB-00709-BI001

BEST POSSIBLE IMAGE

T088063550880070905262017001
GL7007 15820

BReN
07604-A96TB02-8

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