MUNICIPAL FORM No. 102—(Revised Dec. 1, 1953) (TO BE ACCOMPLISHED IN DUPLICATE)

REPUBLIC OF THE PHILIPPINES

CERTIFICATE OF LIVE BIRTH

(FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER)

Province: Leyte
City or Municipality: Baybay

Register Number:
(a) Civil Registrar-General No. .....
(b) Local Civil Registrar No. 1274

1. PLACE OF BIRTH
a. PROVINCE: Leyte
b. CITY OR MUNICIPALITY: Baybay
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address): BO.Ponponan, Baybay, Leyte
d. IS PLACE OF BIRTH INSIDE CITY LIMITS? YES ☐ NO ☒

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
a. PROVINCE: Leyte
b. CITY OR MUNICIPALITY: Baybay
c. NUMBER AND STREET: BO.Ponponan, Baybay, Leyte
d. IS RESIDENCE INSIDE CITY LIMITS? YES ☐ NO ☒
e. IS RESIDENCE ON A FARM? YES ☒ NO ☐

CHILD

3. NAME (Type or print): First: Dionecio Middle: Maglahos Last: Banoc
4. SEX: Male
5a. THIS BIRTH: SINGLE ☒ TWIN ☐ TRIPLET ☐
5b. IF TWIN OR TRIPLET, WAS CHILD: 1ST ☐ 2ND ☐ 3RD ☐
6. DATE OF BIRTH: September Day 1, Year 1961

FATHER

7. NAME: First Nemesio Middle Last Banoc
8. RELIGION: Rom.Cath.
8. NATIONALITY: Filipino
8a. RACE: Brown
9. AGE (At time of this birth) Years: 33
10. BIRTHPLACE: BO.Poponan, Baybay, Leyte
11a. USUAL OCCUPATION: Farmer
11b. KIND OF BUSINESS OR INDUSTRY: None

MOTHER

12. MAIDEN NAME: First Maria Middle Arong Last Maglahos
13. RELIGION: Rom.Cath.
13. NATIONALITY: Filipino
13a. RACE: Brown
14. AGE (At time of this birth) Years: 30
15. BIRTHPLACE: BO.Ponponan, Baybay, Leyte
16. PREVIOUS DELIVERIES TO MOTHER (Do not include this birth): 3
a. How many children are now living? 4
b. How many other children were born alive but are now dead? None
c. How many fetal deaths (fetuses born dead any time after conception)? None

17a. INFORMANT'S SIGNATURE: [signature]
b. NAME IN PRINT: Zosimo Gucela
c. ADDRESS: BO.Ponponan, Baybay, Leyte

18. MOTHER'S MAILING ADDRESS: (Number, Street, City or Municipality, Province)

19. ATTENDANT AT BIRTH

I HEREBY CERTIFY that I attended the birth of this child who was born alive at 9:00 o'clock P. M. on the date above indicated.
a. SIGNATURE: [signature]
b. NAME IN PRINT: Leona Parongao
c. ADDRESS: BO.Ponponan, Baybay, Leyte

d. DATE SIGNED BY ATTENDANT AT BIRTH:
e. TITLE OF ATTENDANT AT BIRTH:
☐ M.D. ☐ MIDWIFE ☐ NURSE ☒ OTHERS (Specify) Pilot

20. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:
a. SIGNATURE: [signature]
b. NAME IN PRINT: Florencio Cuyno
c. TITLE OR POSITION: Actg.Local Civil Registrar
d. DATE: September 28,1961

21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT:
b. DATE WHEN GIVEN NAME WAS SUPPLIED:

22a. LENGTH OF PREGNANCY: ____ COMPLETED WEEKS.
22b. WEIGHT AT BIRTH: ____ Lbs. ____ Oz. 3140
23. LEGITIMATE: ☐ YES ☐ NO

24. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimate birth)
February, 20, 1950
(Month) (Date) (Year)
City or Municipality Baybay, Province Leyte

25. THIS CERTIFICATE IS PREPARED BY:
SIGNATURE: [signature]
NAME IN PRINT: Alicia P Macariola
TITLE OR POSITION: Registrar Clerk
DATE: September 28,1961

19—230 (SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES)

RESERVE FOR BINDING