



Municipal Form No. 102
Revised 1983



(To be accomplished in triplicate)

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

PROVINCE Lanao del Sur LOCAL CIVIL REGISTRY NO. 87-236
CITY/MUNICIPALITY Marawi City

1 NAME (First) (Middle) (Last)
PHLOEM MAGTAHAS DAL

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

3 DATE OF BIRTH (Day) (Month) (Year)
19 May 1987

4 PLACE OF BIRTH (Name of Hospital/Institution, if not in hospital, give street/barangay) (City/Municipality) (Province)
Amai Pakpak General Hospital Marawi City Lanao del Sur

5a TYPE OF BIRTH (Place 'X' on appropriate answer) b IF MULTIPLE BIRTH, CHILD WAS
X 1 Single X 2 Twin X 3 Three or more: 1 First X 2 Second X 3 Third, 4th, etc

6 MAIDEN NAME (First) (Middle) (Last) 7 NATIONALITY 8 RELIGION
Virgie Vicoy Magtahas Filipino Roman Catholic

9 NAME (First) (Middle) (Last) 10 NATIONALITY 11 RELIGION
Efren Tagatongan Dal Filipino Roman Catholic

12 DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back)
April 7, 1982 Marawi City

13 CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at Ligo clock am/pm on the date stated above
Signature Monib P. Maniri, M.D. Address C/O Amai Pakpak General Hospital
Name in print MONIB P. MANIRI, M.D. Marawi City
Title or position Rural Health Physician-Detached June 2, 1987

14 INFORMANT
Signature Efren T. Dal Address Fisheries Village MSU
Name in print EFREN T. DAL Marawi City
Relationship to child Father Date June 2, 1987 2060

15a PREPARED BY b RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature Elizabeth Jaylo Signature William P. Bagunbaran
Name in print ELIZABETH JAYLO Name in print WILLIAM P. BAGUNBARAN
Title or position Staff Nurse Title or position CITY PLANNING & DEV'T. COORDINATOR
Date June 2, 1987 Date EX-OFFICIO LOCAL CIVIL REGISTRAR

15a 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 Lanao del Sur 26178
CITY/MUNICIPALITY Marawi City

17 Weight at Birth (in grams) 3,000 gms. 18 Birth Order of Child
2 01010 Ex first, second, etc 2nd 02

19a Total Number of Children Born Alive 2 b How many children are now living including this birth? 2 c How many children were born alive but are now dead? 0

20 Usual Occupation Teacher 21 Age at time of this Birth 28

22 Usual Residence (Barangay) (City/Municipality) (Province)
Fisheries Village Marawi City Lanao del Sur

23 Usual Occupation None 24 Age at time of this Birth 33

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

Sex Date of Birth Place of Birth Mother's Nationality Father's Nationality
2 790587 04197 1 1

NAME OF CHILD
First Last
PHLOEM MAGTAHAS

07173-FA-701ETS-01110-BI004

BEST POSSIBLE IMAGE



T701071737010111008222019004

ON300775957

BReN

09817-A87KK01-5

Documentary
Stamp Tax Paid

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

