



(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 <u>Leyte</u>		Registry No. <u>98 - 4</u>		
City/Municipality <u>Baybay</u>				
CHILD	1. NAME (First) <u>ARGIE</u> (Middle) <u>RAMOS</u> (Last) <u>BUCAL</u>		For OCRG USE ONLY: Population Reference No. <u>98-49YN01-4</u>	
	2. SEX <u>Male</u> ☒ 1 Male ☐ 2 Female		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR	
	3. DATE OF BIRTH (day) (month) (year) <u>22 December 1998</u>		41 <u>9900004</u>	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>Bgy. Kilin Baybay Leyte</u>		43 <u>1</u>	
	5a. TYPE OF BIRTH <u>1 Single</u> ☒ 1 Single ☐ 2 Twin ☐ 3 Triplet, etc. ☐		49 <u>1</u> 50 <u>221298</u>	
MOTHER	b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> ☐ 1 First ☐ 2 Second ☐ 3 Others, Specify ☐		56 <u>97085</u>	
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>7th</u>		61 <u>1</u>	
	d. WEIGHT AT BIRTH <u>2722</u> grams		62 <u>07</u> 64 <u>2722</u>	
	6. MAIDEN NAME (First) <u>Rodelina</u> (Middle) <u>M.</u> (Last) <u>Ramos</u>		68 <u>1</u> 69 <u>1</u>	
	7. CITIZENSHIP <u>Fil.</u>		70 <u>07</u> 72 <u>07</u> 74 <u>00</u>	
FATHER	8. RELIGION <u>Rom. Cath.</u>		76 <u>270</u> 78 <u>38</u>	
	9a. Total number of children born alive: <u>7</u>		81 <u>27085</u>	
	b. No. of children still living including this birth: <u>7</u>		86 <u>1</u> 87 <u>1</u> 1530	
	c. No. of children born alive but are now dead: <u>0</u>		88 <u>2</u> 91 <u>1</u>	
	10. OCCUPATION <u>Housekeeper</u>		93 <u>1</u> 94 <u>4</u>	
11. Age at the time of this birth: <u>38</u> years		01/16/79 22048 01/04/99		
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Bgy. Kilin Baybay Leyte</u>				
13. NAME (First) <u>Patricio</u> (Middle) <u>R.</u> (Last) <u>Bucal</u>				
14. CITIZENSHIP <u>Fil.</u>				
15. RELIGION <u>Rom. Cath.</u>				
16. OCCUPATION <u>Farmer</u>				
17. Age at the time of this birth: <u>44</u> years				
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)				
19a. ATTENDANT <u>January 16, 1979, t Germen, Agusan del Norte</u>				
☐ 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 <u>1:00am</u> o'clock am/pm on the date stated above.				
Signature <u>Not available during retistration</u> Address <u>Baybay, Leyte</u>				
Name in Print <u>OPHELIA</u>				
Title or Position <u>Traditional Birth Attendant</u> Date <u>December 22, 1998</u>				
20. INFORMANT				
Signature <u>Patricio Bucal</u>		Address <u>Bgy. Kilin, Baybay, Leyte</u>		
Name in Print <u>PATRICIO BUCAL</u>		Date <u>January 4, 1999</u>		
Relationship to the child <u>Father</u>				
21. PREPARED BY		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR		
Signature <u>TERESITA C. MUÑEZ</u>		Signature <u>NOEL V. MANABANAG</u>		
Name in Print <u>TERESITA C. MUÑEZ</u>		Name in Print <u>NOEL V. MANABANAG</u>		
Title or Position <u>Clerk</u>		Title or Position <u>M.C.R.</u>		
Date <u>January 4, 1998</u>		Date <u>January 4, 1999</u>		

06534-C8-402HSD-00004-BI002

BEST POSSIBLE IMAGE



T402065344020000411212017002

QL400054341

BRen
03708-A98YN06-2Documentary
Stamp Tax Paid

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

