(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

Republic of the Philippines

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: Leyte
City/Municipality: Baybay

Registry No. 94-809

FOR OCRG USE ONLY
Population Reference No.:

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: 9 4 0 0 8 0 9

CHILD

1. NAME — (First) Norbert John — (Middle) Ortega — (Last) Villas

2. SEX — x 1 Male ____ 2 Female

3. DATE OF BIRTH — (day) 2 (month) April (year) 1994

4. PLACE OF BIRTH — (Name of Hospital/Clinic/Institution/House No., Street, Barangay) Western Leyte Prov. Hospital, (City/Municipality) Baybay, (Province) Leyte

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) — Third (first, second, third, etc.)

d. WEIGHT AT BIRTH — 3,260gms grams

42: 1

MOTHER

6. MAIDEN NAME — (First) Norma — (Middle) D. — (Last) Ortega

49: 1 — 50: 0 2 0 4 1 4

7. CITIZENSHIP — Fil.

8. RELIGION — RC

9a. Total number of children born alive: 3

b. No. of children still living including this birth: 3

c. No. of children born alive but are now dead: 0

9B: 3 7 0 8 5

10. OCCUPATION — Clerk

11. Age at the time of this birth: 37 years

61: 1

12. RESIDENCE — (House No., Street, Barangay) ViSCA, (City/Municipality) Baybay, (Province) Leyte

62: 0 3 — 64: 3 7 6 0

FATHER

13. NAME — (First) Norberto — (Middle) C. — (Last) Villas

68: 1 — 69: 1

14. CITIZENSHIP — Fil.

15. RELIGION — RC

16. OCCUPATION — Project Asst.

17. Age at the time of this birth: 32 years

70: 0 3 — 72: 0 3 — 74: 0 0

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

May 14, 1989 — Baybay, Leyte

76: 3 8 9 — 79: 3 7

19a. ATTENDANT

x 1 Physician — x 2 Nurse — ____ 3 Midwife — ____ 4 Hilot (Traditional Midwife) — ____ 5 Others (Specify)

81: 3 7 0 8 5

19b. CERTIFICATION OF BIRTH

I hereby certify that I attended the birth of the child who was born alive at 8:55pm o'clock am/pm on the date stated above.

Signature: [signature]
Name in Print: Fulton Ike Arradaza, M.D.
Title or Position: Medical Officer III
Address: WLPH, Baybay, Leyte
Date: 4/2/94

86: 1 — 87: 1

20. INFORMANT

Signature: [signature]
Name in Print: Norberto Villas
Relationship to the child: Father
Address: ViSCA, Baybay, Leyte
Date: 4/2/94

89: 0 2 1 — 91: 3 2

21. PREPARED BY

Signature: [signature]
Name in Print: Camila Morquianos
Title or Position: Nursing Attendant
Date: 4/2/94

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature: [signature]
Name in Print: Noel V. Manahonag
Title or Position: L.C.R.
Date: APR 07 1994

93: 1 — 0950 — 04/04/94

94: 1

07256-27-402SLL-00125-BI003

BEST POSSIBLE IMAGE

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XN300358281

BReN
03708-A94G201-8

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National Statistician and Civil Registrar General
Philippine Statistics Authority