



Municipal Form No. 102
(Revised 1983)

(To be accomplished in triplicate)

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

PROVINCE Leyte LOCAL CIVIL REGISTRY NO. 91-00147
CITY/MUNICIPALITY Kawayan

NAME (First) <u>Jo Jane</u> (Middle) <u>Daisog</u> (Last) <u>Atok</u>	
2. SEX (Place 'X' on appropriate answer) 1 Male ☒ 2 Female	3. DATE OF BIRTH (Day) <u>12</u> (Month) <u>April</u> (Year) <u>1991</u>
4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) <u>Tingkas, n Is. Balacson, Kawayan, Leyte</u>	
5a. TYPE OF BIRTH (Place 'X' on appropriate answer) ☒ 1 Single ☐ 2 Twin ☐ 3 Three or more	
b. IF MULTIPLE BIRTH, CHILD WAS 1 First ☐ 2 Second ☐ 3 Third ☐ 4th, etc.	
6. MAIDEN NAME (First) <u>Dalia</u> (Middle) <u>Daisog</u> (Last) <u>Atok</u>	7. NATIONALITY <u>Filipino</u>
9. NAME (First) <u>Johnny</u> (Middle) <u>B.</u> (Last) <u>Atok</u>	10. NATIONALITY <u>Filipino</u>
11. RELIGION	
12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, Fill Affidavit of Acknowledgment at the back) <u>May 25, 1989</u> <u>Kawayan, Leyte</u>	

13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 12:00 NOON on the date stated above.

Signature Hermenegilda A. Balondo Address Balacson, Kawayan, Leyte
Name in print HERMENEIGILDA BALONDO
Title or position Midwife Date April 12, 1991

14. INFORMANT

Signature Hermenegilda A. Balondo Address Balacson, Kawayan, Leyte
Name in print HERMENEIGILDA BALONDO
Relationship to child Mother Date April 12, 1991

15a. PREPARED BY

Signature JOSE M. CALINGCOY
Name in print JOSE M. CALINGCOY
Title or position Clerk
Date April 25, 1991

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Signature EMER ELIZABETH E. VILLARIANO
Name in print EMER ELIZABETH E. VILLARIANO
Title or position LOCAL CIVIL REGISTRAR
Date April 15, 1991

16a. 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 <u>Leyte</u>		Local Civil Registry No. <u>91-00147</u>		Status <u>1</u>	
CITY/MUNICIPALITY <u>Kawayan</u>		g		15	
Child	17. Weight at Birth (In grams) <u>7.7 kgs.</u>	18. Birth Order of Child Ex. first, second, etc. <u>2nd</u>			
	19. Total Number of Children Born Alive <u>2</u>	20. How many children are now living including this birth? <u>2</u>	21. How many children were born alive but are now dead? <u>0</u>		
	22. Usual Occupation <u>Gov't Employee</u>	23. Age at the time of this Birth <u>28</u>			
	24. Usual Residence (Barangay) <u>Tingkas, n Is. Balacson, Kawayan, Leyte</u>	25. Age at the time of this Birth <u>26</u>			
Mother	26. Usual Occupation <u>Schooling</u>	27. Age at the time of this Birth <u>26</u>			
	28. Usual Residence (Barangay) <u>Tingkas, n Is. Balacson, Kawayan, Leyte</u>	29. Age at the time of this Birth <u>26</u>			
Father	30. Usual Occupation <u>Schooling</u>	31. Age at the time of this Birth <u>26</u>			
	32. Usual Residence (Barangay) <u>Tingkas, n Is. Balacson, Kawayan, Leyte</u>	33. Age at the time of this Birth <u>26</u>			
25. Attendant of Birth (Place 'X' on appropriate answer) 1 Physician ☐ 2 Nurse ☐ 3 Midwife ☒ 4 Heil ☐ 5 Others ☐					
Sex <u>2</u>		Date of Birth <u>10/14/69</u>		Place of Birth <u>33273</u>	
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