Municipal Form No. 102
(Revised 1983)

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

(To be accomplished in triplicate)

PROVINCE: Cebu
CITY/MUNICIPALITY: Cebu City
LOCAL CIVIL REGISTRY NO.: 92-17[illegible]

1. NAME — (First) ROMEO — (Middle) JUMAO-AS — (Last) TORING , JR.

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

3. DATE OF BIRTH (Day) 21 (Month) December (Year) 1992

4. PLACE OF BIRTH (Name of Hospital/Institution: if not in hospital, give street/barangay) Cebu Doctors' Hospital (City/Municipality) Cebu City (Province) Cebu

5a. TYPE OF BIRTH (Place 'X' on appropriate answer): X 1 Single ___ 2 Twin ___ 3 Three or more

b. IF MULTIPLE BIRTH, CHILD WAS: ___ 1 First ___ 2 Second ___ 3 Third, 4th, etc.

Mother:
6. MAIDEN NAME (First) Rosemia (Middle) Torregosa (Last) Jumao-as
7. NATIONALITY: filipino
8. RELIGION: R. Catholic

Father:
9. NAME (First) Romeo (Middle) Tecson (Last) Toring
10. NATIONALITY: filipino
11. RELIGION: R. Catholic

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back)
June 6, 1987 , Cangawa, Buenavista, Bohol

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 8:05 AM *o'clock a.m./p.m. on the date stated above.*
Signature: [signature] Name in print: LOURDES CAPAHI, M.D. Title or position: Attending Physician
Address: Cebu Doctors' Hospital, Osmeña Blvd., Cebu City Date: Dec. 21, 1992

14. INFORMANT
Signature: [signature] Name in print: ROMEO TORING Relationship to child: Father
Address: Fabro hills Subd. Pusok, Lapulapu City Date: Dec. 21, 1992

15a. PREPARED BY
Signature: [signature] Name in print: Dea D. Ministerio Title or position: medical records clerk Date: Dec. 21, 1992

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature: [signature] Name in print: [illegible] PUNZAL Title or position: CLERK III Date: RECD 12/29/92

16a. INFORMATION GIVE 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)

Local Civil Registry No. 92017 (8) Registration Status 1 (15)

RESERVE FOR BINDING

PROVINCE: Cebu
CITY/MUNICIPALITY: Cebu City

Child:
17. Weight at Birth (In grams) 4026 (16)
18. Birth Order of Child Ex. first, second, etc. 3rd. (20)

Mother:
19a. Total Number of Children Born Alive 03 (22)
b. How many children are now living including this birth? 03 (24)
c. How many children were born alive but are now dead? ___ (26)
20. Usual Occupation: Employee (28)
21. Age at the time of this Birth 27 (31)
22. Usual Residence (Barangay) Pusok (City/Municipality) Lapulapu City (Province) Cebu (33)

Father:
23. Usual Occupation: Employee (38)
24. Age at the time of this Birth 31 (41)

25. Attendant at Birth (Place 'X' on appropriate answer): X 1 Physician ___ 2 Nurse ___ 3 Midwife ___ 4 Hilot ___ 5 Others (43)

Sex (44)	Date of Birth (45)	Place of Birth (51)	Mother's Nationality (56)	Father's Nationality (57)
1	21 12 92	72 78	1	1

NAME OF CHILD (58)

First	M.I. (70)	Last (71)
ROMEO JR	J	TORING

07149-F6-400RST-01443-BI023
BEST POSSIBLE IMAGE

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0N000017004

BReN
02217-A92YM0C-0

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