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(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

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
City/Municipality: Manila

Registry No. 94163739

REMARKS/ANNOTATION

FOR OCRG USE ONLY
Population Reference No.

TO BE FILLED UP BY THE OFFICE OF THE CIVIL REGISTRAR

CHILD

1. NAME — (First): Kenneth (Middle): (Last): Oraiz
2. SEX: X 1 Male ___ 2 Female
3. DATE OF BIRTH (day) (month) (year): 26 December 94
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): Jose R. Reyes Memorial Medical Center - Manila
5a. TYPE OF BIRTH: X 1 Single ___ 2 Twin ___ 3 Triplet, etc.
5b. IF MULTIPLE BIRTH, CHILD WAS: ___ 1 First ___ 2 Second ___ 3 Others, Specify
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.): second
d. WEIGHT AT BIRTH: 3409 grams

MOTHER

6. MAIDEN NAME — (First): Gina (Middle): Balaba (Last): Oraiz
7. CITIZENSHIP: Filipino
8. RELIGION: Protestant
9a. Total number of children born alive: two
b. No. of children still living including this birth: two
c. No. of children born alive but are now dead: 0
10. OCCUPATION: Housekeeper
11. Age at the time of this birth: 25 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): 233 Maria Clara St., 11th Ave., Kalookan City

FATHER

13. NAME — (First): N/A (Middle): (Last):
14. CITIZENSHIP: N/A
15. RELIGION: N/A
16. OCCUPATION: N/A
17. Age at the time of this birth: N/A years

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

19a. ATTENDANT
X 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 7:55 pm o'clock am/pm on the date stated above.
Signature
Name in Print: Rosita Pamintuan, M.D.
Title or Position: Medical Specialist II
Address: Jose R. Reyes Mem. Medical Center
Date: December 26, 1994

20. INFORMANT
Signature: Gina B. Oraiz
Name in Print: Gina B. Oraiz
Relationship to the child: Mother
Address: 233 Maria Clara St., 11th Ave., Kalookan City
Date: December 26, 1994

21. PREPARED BY
Signature
Name in Print: Maria Esperanza Tandoc, M.D.
Title or Position: Resident Physician
Date: December 26, 1994

/rcm

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature
Name in Print: [illegible]
Title or Position: City Govt. Dept. Head II (CITY CIVIL REGISTRAR)
Date

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6/12/96

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BEST POSSIBLE IMAGE

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BReN
03905-A94YS14-6

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Lisa Grace S. Bersales
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National Statistician and Civil Registrar General
Philippine Statistics Authority