(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: Negros Oriental
City/Municipality: Dumaguete City

Registry No. 98 1574

For OCRG USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: 9 8 0 1 5 7 4

CHILD

1. NAME: MARY ANGELICA (First) ADA (Middle) VILLOCINO (Last)

48: 1

2. SEX: X ____ 1 Male ____ 2 Female

3. DATE OF BIRTH: 29 (day) April (month) 1998 (year)

49: 2 50: 2 5 0 4 9 8

4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) Silliman University Medical Center, Dgte., (City/Municipality) City, (Province) Neg. Oriental

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): First (first, second, third, etc.)

d. WEIGHT AT BIRTH: 3345 grams

56: 1 1 0 2

MOTHER

6. MAIDEN NAME: Aleli (First) Ferrer (Middle) Ada (Last)

61: 1

7. CITIZENSHIP: Filipino

8. RELIGION: Roman Catholic

62: 0 1 64: 3 2 4 5

9a. Total number of children born alive: 1

b. No. of children still living including this birth: 1

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

68: 1 69: 1

10. OCCUPATION: Instructor- VISCA

11. Age at the time of this birth: 34 years

70: 0 1 72: 0 1 74: 6 0

12. RESIDENCE: (House No., Street, Barangay) 26 San Juan Street, (City/Municipality) Dumaguete City, (Province) Negros Oriental

FATHER

13. NAME: Santos (First) Jr. (Middle) Berdin (Last) Villocino

76: 1 5 2 79: 3 4

14. CITIZENSHIP: Filipino

15. RELIGION: Roman Catholic

16. OCCUPATION: Businessman

17. Age at the time of this birth: 35 years

81: 4 6 1 0 2

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
December 7, 1996, Dumaguete City, Negros Oriental

86: 1 87: 1 01510

19a. ATTENDANT
X 1 Physician ____ 2 Nurse ____ 3 Midwife ____ 4 Hilot (Traditional Midwife) ____ 5 Others (Specify)

88: 4 3 5 91:

19b. CERTIFICATION OF BIRTH
X I hereby certify that I attended the birth of the child who was born alive at 5:09 o'clock ~~a.m./p.m.~~ on the date stated above.

Signature: [signature]
Name in Print: MA. ANTONIA GEM C. AUSTRIA, M.D.
Title or Position: Attending Obstetrician
Address: Silliman University Medical Center, Dgte., City, Neg. Oriental
Date: April 28, 1998

93: 1 120790 46102

20. INFORMANT
Signature: Santos B. Villocino Jr.
Name in Print: Father
Relationship to the child:
Address: 26 San Juan Street, Dgte., City, Neg. Or.
Date: April 28, 1998

94: 1 045098

21. PREPARED BY
Signature: [signature]
Name in Print: Miss Loreta S. Batiancila
Title or Position: Head, Med. Rec. and Lib.
Date: April 28, 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: [illegible]
Title or Position:
Date:

08637-2D-999MDA-05647-BI001

BEST POSSIBLE IMAGE

T0890863799905647082520230 01

AR000109084

BReN
04610-A98HR05-8

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