PHILIPPINE STATISTICS AUTHORITY
PSA

(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: Leyte
City/Municipality: Ormoc City
Registry No.: 97-5461

CHILD

1. NAME (First) MA. SHERLITA (Middle) SERVIDOR (Last) ROSAL
2. SEX: ___ 1 Male x 2 Female
3. DATE OF BIRTH (day) (month) (year): 2 November 1997
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): Ormoc Maternity & Children's Hospital, Ormoc City, 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) (first, second, third, etc.): 3rd
d. WEIGHT AT BIRTH: 3674 grams

MOTHER

6. MAIDEN NAME (First) FLORA (Middle) BARDOQUILLO (Last) SERVIDOR
7. CITIZENSHIP: Filipino
8. RELIGION: R.C.
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
10. OCCUPATION: Housewife
11. Age at the time of this birth: 32 years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): Mabini st., Ormoc City, Leyte

FATHER

13. NAME (First) RUBEN (Middle) ABAPO (Last) ROSAL
14. CITIZENSHIP: Filipino
15. RELIGION: R.C.
16. OCCUPATION: Mechanical Engineer
17. Age at the time of this birth: 32 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
August 16, 1993 @ Tuburan, Cebu

19a. ATTENDANT
___ 1 Physician x 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 10:55 a.m. o'clock am/pm on the date stated above.

Signature: *Cdagurawat*
Name in Print: CHERLY LUANNE DAGURAWAT
Title or Position: Nurse
Address: Ormoc Maternity & Children's Hospital
Date:

20. INFORMANT
Signature: *Flora S. Rosal*
Name in Print: FLORA ROSAL
Relationship to the child: MOTHER
Address: MABINI ST., ORMOC CITY
Date:

FOR THE CITY CIVIL REGISTRAR

21. PREPARED BY
Signature: *JPepito*
Name in Print: JANET D. PEPITO
Title or Position: Finance Officer-I
Date: November 5, 1997

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
DELIA T. ROSAL
REGISTRATION OFFICER IV
Signature: ORMOC CITY
Name in Print: ACHILLES A. SILVA
Title or Position: City Civil Registrar
Date: 11/4/97

REMARKS/ANNOTATION

For OCRG USE ONLY: Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: 97-05461
2700
081693
22525
110697

06605-7E-402VAV-01059-BI053

BEST POSSIBLE IMAGE

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