



(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 <u>Leyte</u>		Registry No. <u>95-106</u>	
City/Municipality <u>Hilongos</u>			
1. NAME (First) <u>SWEET CHARISH</u> (Middle) <u>PAYAC</u> (Last) <u>GORIDING</u>		For OCRG USE ONLY Population Reference No. <u>3719-A94ZS04-3</u>	
2. SEX <u>1 Male</u> <u>2 Female</u>		3. DATE OF BIRTH (day) <u>26</u> (month) <u>December</u> (year) <u>1994</u>	
CHILD	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>Hilongos District Hospital, Hilongos</u> (City/Municipality) <u>Leyte</u> (Province)		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
	5a. TYPE OF BIRTH <u>X 1 Single</u> <u>2 Twin</u> <u>3 Triplet, etc.</u>		
	b. IF MULTIPLE BIRTH CHILD WAS <u>1 First</u> <u>2 Second</u> <u>3 Others, Specify</u>		
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>second</u>	d. WEIGHT AT BIRTH <u>3,200</u> grams	
MOTHER	6. MAIDEN NAME (First) <u>ALICIA</u> (Middle) <u>PAZ</u> (Last) <u>PAZ</u>		41 46 48 49 50 55 56 61 62 64 68 69 70 72 74 76 79 81 87 88 89 93 94
	7. CITIZENSHIP <u>Philippine</u>		
	8. RELIGION <u>Catholic</u>		
	9a. Total number of children born alive: <u>2</u>	b. No. of children still living including this birth: <u>2</u>	c. No. of children born alive but are now dead: <u>0</u>
	10. OCCUPATION <u>Homemaker</u>		11. Age at the time of this birth: <u>34</u> years
	12. RESIDENCE (House No., Street, Barangay) <u>Barangay San Isidro</u> (City/Municipality) <u>Hilongos</u> (Province) <u>Leyte</u>		
FATHER	13. NAME (First) <u>JOSE</u> (Middle) <u>JOSE</u> (Last) <u>JOSE</u>		14. CITIZENSHIP <u>Philippine</u>
	15. RELIGION <u>Catholic</u>		
	16. OCCUPATION <u>Homemaker</u>		
17. Age at the time of this birth: <u>34</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>August 17, 1988, Nabalon, Leyte</u>			
19a. ATTENDANT <u>August 17, 1988, Nabalon, Leyte</u> <u>1 Physician</u> <u>2 Nurse</u> <u>3 Midwife</u> <u>X 4 Hilot (Traditional Midwife)</u> <u>5 Others (Specify)</u>			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>5:30 p.m.</u> o'clock am/pm on the date stated above.			
Signature <u>Ronan</u> Address <u>Hilongos, Leyte</u>			
Name in Print <u>ANTONIA TOMA-LADON</u> Title or Position <u>Medical Officer IV</u> Date <u>September 26, 1994</u>			
20. INFORMANT <u>PREMILTO GORIDING JR.</u> Address <u>Barangay San Isidro, Nabalon, Leyte</u> Relationship to the child <u>Father</u> Date <u>December 26, 1994</u>			
21. PREPARED BY <u>PAHIA H. FLORIS</u> Title or Position <u>Nurse I</u> Date <u>December 26, 1994</u>			
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>ERNESTO MAYAFLACHE</u> Name in Print <u>ERNESTO MAYAFLACHE</u> Title or Position <u>Civil Registrar</u> Date <u>JAN 23 1995</u>			

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CLAIRE DENNIS S. MAPA, Ph. D.

National Statistician and Civil Registrar General
Philippine Statistics Authority