

(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 Cebu Registry No. 98-3047
 City/Municipality Toledo City

1. NAME (First) (Middle) (Last) <u>BLANCHE BRANCHETTE DIVINAGRACIA LLERA</u>		
2. SEX <u>1 Male</u> ☒ <u>2 Female</u>	3. DATE OF BIRTH (day) (month) (year) <u>19 Sept. 1998</u>	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Toledo City Hospital Toledo City Cebu</u>		
5a. TYPE OF BIRTH <u>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) <u>2nd</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>3005</u> grams	
6. MAIDEN NAME (First) (Middle) (Last) <u>MAURA PAGULO DIVINAGRACIA</u>		
7. CITIZENSHIP <u>Philippine</u>		8. RELIGION <u>Roman 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>None</u>		11. Age at the time of this birth: <u>32</u> years
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Gablangon Pinamungajan Cebu</u>		
13. NAME (First) (Middle) (Last) <u>MARGARITO CARANOG LLERA</u>		
14. CITIZENSHIP <u>Philippine</u>		15. RELIGION <u>Roman Catholic</u>
16. OCCUPATION <u>Technician</u>		17. Age at the time of this birth: <u>35</u> years

 18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
Dec. 25, 1993 Negros Oriental

 19a. ATTENDANT
☒ 1 Physician ☒ 2 Nurse ☒ 3 Midwife
☐ 4 Healer (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 6:20 o'clock
 am/pm on the date stated above.

 Signature [Signature] Address Toledo City Hospital
 Name in Print RODOLFO OLIMAGO MD Toledo City
 Title or Position Medical Officer IV Date Sept. 19, 1998

 20. INFORMANT
 Signature [Signature] Address Gablangon
 Name in Print MAURA LLERA Pinamungajan
 Relationship to the child Mother Date Sept. 19, 1998

 21. PREPARED BY
 Signature [Signature]
 Name in Print NIMFA DIAZ
 Title or Position Nursing Attendant
 Date Sept. 19, 1998

 22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
 Signature [Signature]
 Name in Print LUCIA R. SAURO
 Title or Position Acting City Civil Registrar
 Date TOLEDO CITY 10/6/98
For OCRG USE ONLY:
Population Reference No.TO BE FILLED UP AT THE
OFFICE OF THE CIVIL
REGISTRAR41
[Boxed numbers]48
[Boxed numbers]49 50
[Boxed numbers]56
[Boxed numbers]61
[Boxed numbers]62 64
[Boxed numbers]68 69
[Boxed numbers]70 72 74
[Boxed numbers]76 79
[Boxed numbers]81
[Boxed numbers]86 87
[Boxed numbers]88 91
[Boxed numbers]93
[Boxed numbers]94
[Boxed numbers]
 12/25/98
 46000
 10/06/98

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BEST POSSIBLE IMAGE



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 Documentary
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 Lisa Grace S. Bersales
 LISA GRACE S. BERSALES, Ph.D.
 National Statistician and Civil Registrar General
 Philippine Statistics Authority
