(Copy for OCRG)

PHILIPPINE STATISTICS AUTHORITY PSA

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.)

REMARKS/ANNOTATION

Province: Leyte
City/Municipality: Baybay
Registry No.: 97-2069

For OCRG USE ONLY:
Population Reference No.: [illegible]

CHILD

1. NAME — (First) IANVIE NOREAN (Middle) ABAJON (Last) MIAGA

2. SEX — ___ 1 Male ___ X 2 Female

3. DATE OF BIRTH — (day) 19 (month) August (year) 1997

4. PLACE OF BIRTH — (Name of Hospital/Clinic/Institution/House No., Street, Barangay) Brgy. Caridad (City/Municipality) Baybay (Province) 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) 1st (first, second, third, etc.)

d. WEIGHT AT BIRTH 2722± grams

MOTHER

6. MAIDEN NAME — (First) Lewela (Middle) P. (Last) Abajon

7. CITIZENSHIP Filipino

8. RELIGION Rom. Cath.

9a. Total number of children born alive: 01

b. No. of children still living including this birth: 01

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

10. OCCUPATION Housekeeper

11. Age at the time of this birth: 18 years

12. RESIDENCE (House No., Street, Barangay) Brgy. Caridad (City/Municipality) Baybay (Province) Leyte

FATHER

13. NAME — (First) Samuel (Middle) L. (Last) Miaga

14. CITIZENSHIP Filipino

15. RELIGION Rom. Cath.

16. OCCUPATION None

17. Age at the time of this birth: 21 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
May 15 ,1997 at Baybay , Leyte

19a. ATTENDANT
___ 1 Physician ___ 2 Nurse ___ 3 Midwife
X 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 ___ o'clock am/pm on the date stated above.
Signature: Not Available during registration
Name in Print: FRUCTOUSA LAWAG
Address: Baybay , Leyte
Title or Position: Traditional Birth Attendant/
Date: August 19 ,1997

20. INFORMANT
Signature: [signature]
Name in Print: SAMUEL L. MIAGA
Relationship to the child: Father
Address: Baybay , Leyte
Date: August 22 ,1997

21. PREPARED BY
Signature: [signature]
Name in Print: MARIBEL R. LASACA
Title or Position: Clerk
Date: August 22 ,1997

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: NOEL V. MANAGBANAG
Title or Position: L. C. R.
Date: August 22, 1997

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41: 1 9 C
48:
49: 50:
56:
61:
62: 64:
66: 69:
70: 72: 74:
76: 79:
81:
86: 87: 3350
88: 2 9 C 91:
93: 37085
05/15/97
94:
08/22/97

06722-8F-402ANG-01114-BI002

BEST POSSIBLE IMAGE

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BReN
03708-A97RK06-5

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