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.)

REMARKS/ANNOTATION

Province: Leyte
City/Municipality: Javier
Registry No. 98-627

CHILD

1. NAME	(First) JOYCEE	(Middle) SILLEZA
	(Last) MANDIA	
2. SEX	___ 1 Male x 2 Female	
3. DATE OF BIRTH (day) (month) (year)	28 September 1998	
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay)	Poblacion Zone II	(City/Municipality) Javier, (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) (first, second, third, etc.)	Third	
d. WEIGHT AT BIRTH	3629 grams	

MOTHER

6. MAIDEN NAME	(First) JOSEPHINE	(Middle) SOLIS
	(Last) SILLEZA	
7. CITIZENSHIP	Filipino	
8. RELIGION	R. Catholic	
9a. Total number of children born alive: 03	b. No. of children still living including this birth: 03	c. No. of children born alive but are now dead: 00
10. OCCUPATION	Housekeeper	
11. Age at the time of this birth:	26 years	
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)	Poblacion Zone II, Javier, Leyte	

FATHER

13. NAME	(First) DAVID	(Middle) CABIA
	(Last) MANDIA	
14. CITIZENSHIP	Filipino	
15. RELIGION	R. Catholic	
16. OCCUPATION	Laborer	
17. Age at the time of this birth:	29 years	

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
21 November, 1994 - Javier, 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 3:30 o'clock am/pm on the date stated above.

Signature: (signed) Rosita Abogar
Name in Print: ROSITA ABOGAR
Title or Position: Trad. Midwife
Address: Brgy. Malitbogay, Javier, Leyte
Date: 30 September, 1998

20. INFORMANT
Signature: (signed) Rosita Abogar
Name in Print: ___
Relationship to the child: Representative
Address: Brgy. Malitbogay, Javier, Leyte
Date: 30 September, 1998

21. PREPARED BY
Signature: (signed)
Name in Print: NILA B. SARILE
Title or Position: Clerical Aide
Date: 30 September, 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: (signed)
Name in Print: MANUELA M. GOLGOTA
Title or Position: Mun. Civil Registrar
Date: 30 September, 1998

3724-A98-... | 98000627 | 1 | 2 | 280998 | 37242 | 1 | 035629 | 1 | 1 | 03 | 03 | 00 | 720 | 26 | 37242 | 1 | 1 | 999 | 29 | 1 | 4

07086-0B-402AGG-00636-BI001

BEST POSSIBLE IMAGE

T402070864020063605272019001

BReN
03724-A98TU01-6

Documentary Stamp Tax Paid

(signed)
JOSIE B. PEREZ
Assistant Secretary
(Officer-in-Charge)