MUNICIPAL FORM 102 - (Revised Dec. 1, 1958) (TO BE ACCOMPLISHED IN DUPLICATE)

REPUBLIC OF THE PHILIPPINES

CERTIFICATE OF LIVE BIRTH

(FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER)

Register Number:

Province: Leyte (a) Civil Registrar-General No.

City or Municipality: Kananga (b) Local Civil Registrar No.

1. PLACE OF BIRTH
a. Province: Leyte
b. City or Municipality: Kananga
c. Name of Hospital or Institution (If not in hospital, give street address)
d. Is place of birth inside city limits? Yes ☐ No ☒

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
a. Province: Leyte
b. City of Municipality: Kananga
c. Number and Street: Bo. Montebello
d. Is residence inside city limits? Yes ☐ No ☒
e. Is residence on a farm? Yes ☐ No ☒

CHILD
3. NAME (Type or print): First: Lyndon Middle: Im-anas Last: Maninga
4. SEX: M
5a. THIS BIRTH: Single ☒ Twin ☐ Triplet ☐
5b. IF TWIN OR TRIPLET WAS CHILD: 1st ☐ 2nd ☐ 3rd ☐
6. DATE OF BIRTH: Month Nov. Day Year 19..

FATHER
7. NAME: First: Iluminado Middle: Otero Last: Maninga
RELIGION: R.C.
8. NATIONALITY: Fil.
8a. RACE: Brown
9. AGE (At time of this birth): 29 yrs.
10. BIRTHPLACE: Bo. Montebello, Kananga, Leyte
11a. USUAL OCCUPATION: Security Guard
11b. KIND OF BUSINESS OR INDUSTRY

MOTHER
12. MAIDEN NAME: First: Rufina Middle: Im-anas Last: Maninga
RELIGION: R.C.
13. NATIONALITY: Fil.
13a. RACE: Brown
14. AGE (At time of this birth): 27 yrs.
15. BIRTHPLACE: Bo. Kiloctogan, Kananga, Leyte
16. PREVIOUS DELIVERIES TO MOTHER (Do not include this birth)
a. How many children are now living? 2
b. How many other children were born alive but are now dead? 0
c. How many fetal deaths (fetus born dead) (any time after conception)? 0

17a. INFORMANT'S SIGNATURE: Rufina Maninga
a. NAME IN PRINT: Rufina Maninga
b. ADDRESS: Bo. Montebello, Kananga, Leyte

18. MOTHER'S MAILING ADDRESS (Number, Street, City or Municipality, Province): Zone Pluto Bo. Montebello, Kananga, Leyte

19. ATTENDANT OF BIRTH
I HEREBY CERTIFY that I attended the birth of this child who was born alive at ... o'clock ... M. on the date above indicated.
a. SIGNATURE:
b. NAME IN PRINT: Marcelina Valleser
c. ADDRESS: Bo. Montebello, Kananga, Leyte
d. DATE SIGNED BY ATTENDANT OF BIRTH:
e. TITLE OF ATTENDANT AT BIRTH: M.D. ☐ Midwife ☐ Nurse ☐ Others (Specify) ☒ Hilot

20. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:
a. SIGNATURE:
b. NAME IN PRINT:
c. TITLE OR POSITION:
d. DATE:

21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT:
b. DATE WHEN GIVEN NAME WAS SUPPLIED:

22a. LENGTH OF PREGNANCY: ... COMPLETED WEEKS
22b. WEIGHT AT BIRTH: lbs. oz.
23. LEGITIMATE: ☐ Yes ☐ No

24. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimate birth): September 11, 1950 (Month) (Date) (Year); City or Municipality: Kananga; Province: Leyte

25. THIS CERTIFICATE IS PREPARED BY:
SIGNATURE:
NAME IN PRINT: Ofelia P. Ocenar
TITLE OF POSITION:
DATE: Dec. 27, 1983

10—239 (SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES) 2160

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BReN
03726-A83WA01-9

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CARMELITA N. ERICTA
Administrator and Civil Registrar General
National Statistics Office