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 15a.)

REMARKS/ANNOTATION

Province: Leyte
City/Municipality: Baybay
Registry No.: 95L/274

CHILD

1. NAME: (First) (Middle) (Last)

2. SEX: ____ 1 Male ____ 2 Female

3. DATE OF BIRTH: (day) (month) (year)

4. PLACE OF BIRTH: (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province)
Western Leyte Provincial Hospital, Baybay, Leyte

5a. TYPE OF BIRTH: ____ 1 Single ____ 2 Twin X 3 Triplet, etc.

5b. IF MULTIPLE BIRTH, CHILD WAS: ____ 1 First ____ 2 Second X 3 Others, Specify

c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.): 1st

d. WEIGHT AT BIRTH: 3,500 grams

MOTHER

6. MAIDEN NAME: (First) Melba (Middle) Cordova (Last)

7. CITIZENSHIP: Fil

8. RELIGION: Rom

9a. Total number of children born alive: 1

b. No. of children still living including this birth: 1

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

10. OCCUPATION: Housewife

11. Age at the time of this birth: 22 years

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

FATHER

13. NAME: (First) Vicente (Middle) Codog (Last) Martirez

14. CITIZENSHIP: Fil

15. RELIGION: RC

16. OCCUPATION: Employee

17. Age at the time of this birth: 24 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
May 21, 1994 Visca, Baybay, Leyte

19a. ATTENDANT
____ 1 Physician ____ 2 Nurse ____ 3 Midwife
X 4 Hilot (Traditional Midwife) X 5 Others (Specify)

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at 10:12PM o'clock am/pm on the date stated above.

Signature:
Name in Print: Regina C. Fulvadora, M.D.
Title or Position: Medical Officer
Address: WLPH, Baybay, Leyte
Date: 5/14/95

20. INFORMANT
Signature:
Name in Print: Vicente C. Martirez
Relationship to the child: Father
Address: Utod, Baybay, Leyte
Date: 5/14/95

21. PREPARED BY
Signature:
Name in Print: Estrella Albarico
Title or Position: Staff Nurse
Date: 5/14/95

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature:
Name in Print: Noel V. Managbanag
Title or Position: D.C.R.
Date: 5/25

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BEST POSSIBLE IMAGE
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CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

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