

Municipal Form No. 102
(Revised 1989)REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(Fill out, completely, or watch and legibly in ink, or by computer)

PROVINCE Leyte LOCAL CIVIL REGISTRAR NO. 85-489

CITY/MUNICIPALITY Baybay

1. NAME (First) CECILIE MARIE (Middle) OQUIAS (Last) QUINONES

2. SEX (Place 'X' on appropriate answer) 1 Male 2 Female

3. DATE OF BIRTH (Day) 12th (Month) February (Year) 1987

4. PLACE OF BIRTH (Name of Hospital/Institution, if not in hospital, give street/barangay) (City/Municipality) (Province)
Western Leyte Provincial Hospital Baybay Leyte

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 1 Single 2 Twin 3 Three or more

b. IF MULTIPLE BIRTH, LIST ALL 1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last)
Lilia Bastasa Oquias

7. NATIONALITY Fil

8. RELIGION Re

9. NAME (First) (Middle) (Last)
Cesar Pelede Quinones

10. NATIONALITY Fil

11. RELIGION Re

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back)
July 4, 1985 Baybay, Leyte

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 3:35PM (clock a.m. or p.m.) on the date stated above.

Signature [Signature] Address WLPH
Name in print VICENTE P. GERMANO, M.D. Baybay, Leyte
Title or position Resident Physician Date 2/12/87

14. INFORMANT
Signature [Signature] Address Visa 2810
Name in print CESAR P. QUINONES Baybay, Leyte
Relationship to child Father Date 2/12/87

15a. PREPARED BY
Signature [Signature] Address Baybay, Leyte
Name in print EUGENIA CAVIOLA 2810
Title or position Nursing Aide Date 2/12/87

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature [Signature] Name in print PETRONIO V. SUELA
Title or position L.C.R. Date 2/12/87

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

b. DATE WHEN INFORMATION WAS SUPPLIED

(Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar)

PROVINCE Leyte Local Civil Registry No. 8700489 Registration Status 15

CITY/MUNICIPALITY Baybay

17. Weight at Birth (In grams) 2,800gms 2800

18. Birth Order of Child Ex. first, second, etc. 1st. 01

19a. Total Number of Children Born Alive 1 01

b. How many children are now living including this birth? 1 01

c. How many children were born alive but are now dead? 0 00

20. Usual Occupation Housekeeper 220

21. Age at the time of this Birth 28 28

22. Usual Residence (Barangay) (City/Municipality) (Province)
Visa Baybay Leyte

23. Usual Occupation Driver 918

24. Age at the time of this Birth 33 33

25. Attendant at Birth (Place 'X' on appropriate answer)
1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others 4

Sex 2 Date of Birth 12/02/87 Place of Birth 37082 Mother's Nationality 1 Father's Nationality 4

NAME OF CHILD

CECILIE MARIE OQUIAS QUINONES

03435-1C-402MBF-00365-BI001

BEST POSSIBLE IMAGE



T402034354020036505282009001

FF100254135

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03708-A87DC06-3Documentary
Stamp Tax Paid

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