

Philippine Statistics Authority
Form No. 101
(Revised 1983)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE LISTALOCAL CIVIL REGISTRY NO. 85-464CITY/MUNICIPALITY DAVAO

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

2. SEX (Place 'X' on appropriate answer) MALE 3. DATE OF BIRTH (Day) (Month) (Year)

4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) (City/Municipality) (Province)

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 1 Single 2 Twin 3 Three or more 5b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last) 7. NATIONALITY 8. RELIGION

9. NAME (First) (Middle) (Last) 10. NATIONALITY 11. RELIGION

12. DATE AND PLACE OF MARRIAGE OF PATIENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back)

13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive on 2-28-85 at 8:00 a.m. on his side stated above.

Signature

Name in print ALBERTA ROMANTitle or position MidwifeAddress Box 10, P.O. Davao, Davao, DavaoDate 2-28-85

14. INFORMANT

Signature

Name in print ALBERTO P. ALARCONRelationship to child FatherAddress Box 10, P.O. Davao, Davao, DavaoDate 2-28-85

15. PREPARED BY

Signature

Name in print ALBERTO P. ALARCONTitle or position 1140

Date

Signature

Name in print ALBERTO P. ALARCONTitle or position 1140

Date

16. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

17. DATE WHEN INFORMATION WAS SUPPLIED

06227-F7-402FSG-00006-BI001

BEST POSSIBLE IMAGE



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National Statistician and Civil Registrar General
Philippine Statistics Authority