(Copy for OCRG)

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

CERTIFICATE OF LIVE BIRTH

94

(Fill out completely, accurately and legibly. Use ink or typewriter.
Place X before the appropriate answer in items 2, 5a, 5b and 19a.)

Province: CEBU
City/Municipality: CEBU CITY

Registry No. 98 15733

CHILD

1. NAME — (First): RUD LUIS — (Middle): GOCHOCO — (Last): GONZAGA

2. SEX: X 1 Male ____ 2 Female

3. DATE OF BIRTH (day) (month) (year): 17 JUNE 1998

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/House No., Street, Barangay) (City/Municipality) (Province): METRO CEBU COMMUNITY HOSPITAL, CEBU CITY CEBU

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.): SECOND

d. WEIGHT AT BIRTH: 2550 grams

MOTHER

6. MAIDEN NAME — (First): LUISA — (Middle): ANGIE — (Last): TAN GOCHOCO

7. CITIZENSHIP: FILIPINO

8. RELIGION: ROMAN CATHOLIC

9a. Total number of children born alive: 2

b. No. of children still living including this birth: 2

c. No. of children born alive but are now dead: 0

10. OCCUPATION: HOUSEWIFE

11. Age at the time of this birth: 33 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province): c/o BEN CASAS HI-WAY, LOOC, DANAO CITY

FATHER

13. NAME — (First): RUDY — (Middle): LUCERO — (Last): GONZAGA

14. CITIZENSHIP: FILIPINO

15. RELIGION: ROMAN CATHOLIC

16. OCCUPATION: FISHERMAN

17. Age at the time of this birth: 26 years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.): OCTOBER 15, 1994 COGON, CEBU CITY

19a. ATTENDANT: X 1 Physician ____ 2 Nurse ____ 3 Midwife ____ 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 9:08 A.M. o'clock am/pm on the date stated above.

Signature: [signature]
Name in Print: LUCY CATEDRAL, M.D.
Title or Position: PHYSICIAN
Address: COCH CEBU CITY
Date: JUNE 20, 1998

20. INFORMANT
Signature: [signature]
Name in Print: RUDY L. GONZAGA
Relationship to the child: Father
Address: c/o Ben Casas, Hi-way, Looc, Danao city
Date: June 20, 1998

21. PREPARED BY
Signature: [signature]
Name in Print: MADELYN P. JUMAO-AS
Title or Position: Clerk
Date: June 20, 1998

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature: [signature]
Name in Print: [illegible]
Title or Position: [illegible]
Date: 6/25/98

For OCRG USE ONLY:
Population Reference No.

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41	9 8 1 5 7 3 3
48	1
49	1
50	1 7 0 6 9 8
56	2 2 1 7 8
61	1
62	0 2
64	7 5 5 0
65	1
66	1
70	0 2
72	0 2
74	0 0
76	2 2 0
79	3 3
81	2 2 2 3 6
86	1
87	1
88	6 4 9
91	2 6
93	1 10/15/94 37382
94	1 06/25/98

08074-HF-991GSM-02154-BI001
BEST POSSIBLE IMAGE

T0800807499102154020820220O1

LP100418381

BReN
02217-A98LH02-4

Documentary
Stamp Tax Paid

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