



(Copy for OCRG)

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
Republic of the Philippines 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 19a.)					
Province <u>LEYTE</u>		Registry No. <u>95-703</u>			
City/Municipality <u>ORMOC</u>					
CHILD	1. NAME (First) (Middle) (Last) <u>SARAH AURORA WARQUE TABADA</u>		FOR OCRG USE ONLY Population Reference No. <u>3-0-18-101-0</u>		
	2. SEX <u>1</u> Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>18 February 1995</u>		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., Street, Barangay) <u>ORMOC MATERNITY & CHILDREN'S HOSPITAL</u>		(City/Municipality) (Province) <u>ORMOC CITY LEYTE</u>		
	5a. TYPE OF BIRTH <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify _____		
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>3rd</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3175</u> grams		
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>MA. AURORA TERESITA ROLDAN WARQUE</u>				
	7. CITIZENSHIP <u>Fil.</u>		8. RELIGION <u>R.C.</u>		
	9a. Total number of children born alive: <u>3</u>		b. No. of children still living including this birth: <u>3</u>		c. No. of children born alive but are now dead: <u>0</u>
	10. OCCUPATION <u>Researcher/ VISCA</u>		11. Age at the time of this birth: <u>32</u> years		
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>APT. 5 Visca Baybay Leyte</u>				
FATHER	13. NAME (First) (Middle) (Last) <u>WINSTON MEMBREBE TABADA</u>				
	14. CITIZENSHIP <u>FIL.</u>		15. RELIGION <u>UCCP</u>		
	16. OCCUPATION <u>PROFESSOR/ Visca</u>		17. Age at the time of this birth: <u>39</u> years		
	18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>November 18, 1984 @ Sacred Heart Church Cebu City</u>				
	19a. ATTENDANT <u>X</u> 1 Physician <u>2</u> Nurse <u>3</u> Midwife <u>4</u> Hilot (Traditional Midwife) <u>5</u> Others (Specify _____)				
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>8:40 pm</u> o'clock am/pm on the date stated above. Signature <u>[Signature]</u> Address <u>ORMOC MATERNITY & CHILDREN'S HOSPITAL</u> Name in Print <u>ALICIA R. TUGONON, M.D.</u> OB- GYNE Date <u>02/18/95</u> Title or Position _____					
20. INFORMANT Signature <u>[Signature]</u> Address <u>APT. 5, Visca, Baybay</u> Name in Print <u>MA. AURORA T.W. TABADA</u> Leyte Relationship to the child <u>MOTHER</u> Date <u>02/20/95</u>					
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>AMELITA R. ARTIGAS, R.M.</u> MIDWIFE Title or Position _____ Date <u>02/20/95</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>ARCHILLES SILVA</u> Title or Position <u>CITY CIVIL REGISTRAR</u> Date <u>2/20/95</u>			

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Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General
Philippine Statistics Authority