Municipal Form No. 102
(Revised 1963)

(To be accomplished in Triplicate)

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

PROVINCE: Leyte — LOCAL CIVIL REGISTRY NO.: 92-2071
CITY/MUNICIPALITY: Baybay

1. NAME	(First) CHARLINDO	(Middle) SIERA	(Last) TORRION
2. SEX (Place 'X' on appropriate answer)	X 1 Male ___ 2 Female	3. DATE OF BIRTH (Day) 6	(Month) September (Year) 1992
4. PLACE OF BIRTH (Name of hospital/institution; if not in hospital, give street/barangay)	Brgy. Villa Solidaridad	(City/Municipality) Baybay	(Province) Leyte
5a. TYPE OF BIRTH (Place 'X' on appropriate answer)	X 1 Single ___ 2 Twin ___ 3 Three or more	5b. IF MULTIPLE BIRTH, CHILD WAS ___ 1 First ___ 2 Second ___ 3 Third, 4th, etc.	

Mother

6. MAIDEN NAME	(First) Teresita	(Middle) A.	(Last) Siega
7. NATIONALITY	Fil.		
8. RELIGION	Rom. Cath.		

Father

9. NAME	(First) Charlito	(Middle) P.	(Last) Torrion
10. NATIONALITY	Fil.		
11. RELIGION	Rom. Cath.		

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back)
Date: January 28, 1988 — Place: Mahaplag, Leyte

13. CERTIFICATE OF ATTENDANT OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at 11:30 o'clock a.m./p.m. on the date stated above.
Signature: ___ — Address: Brgy. Villa Solidaridad, Baybay, Leyte
Name in print: SOFIA SARBOSA
Title or position: Hilot — Date: 9-6-92

14. INFORMANT
Signature: Thelma Urbiztondo — Address: Brgy. Villa Solidaridad, Baybay, Leyte
Name in print: THELMA URBIZTONDO
Relationship to child: Aunt — Date: 9-15-92

15a. PREPARED BY
Signature: ___
Name in print: TERESITA G. NUÑES
Title or position: Clerk
Date: 9-15-92

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature: ___
Name in print: NOEL V. MANAGBANAG
Title or position: L.C.R. 2110
Date: 9-15-92

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)

Local Civil Registry: 9 2 0 2 0 7 1 (8) — Registration Status: 1 (15)

PROVINCE: Leyte
CITY/MUNICIPALITY: Baybay

Child

17. Weight at Birth (In grams): 2722 — 2 7 2 2 (16)
18. Birth Order of Child (Ex. first, second, etc.): 2nd — 0 2 (20)

Mother

19a. Total Number of Children Born Alive: 2 — 0 2 (22)
b. How many children are now living including this birth? 2 — 0 2 (24)
c. How many children were born alive but are now dead? ___ — 0 0 (26)
20. Usual Occupation: Housekeeper — X 2 0 (28)
21. Age at the time of this birth: 39 — 3 9 (31)
22. Usual Residence: Barangay Brgy. Villa Solidaridad, (City/Municipality) Baybay, (Province) Leyte — 3 7 0 8 5 (33)

Father

23. Usual Occupation: Farmer — 6 1 9 (39)
24. Age at the time of this birth: 24 — 2 4 (41)

25. Attendant of Birth (Place 'X' on appropriate answer): ___ 1 Physician ___ 2 Nurse ___ 3 Midwife X 4 Hilot ___ 5 Others — 4 (43)

RESERVE FOR BINDING

Sex (44)	Date of Birth (45)	Place of Birth (51)	Mother's Nationality (56)	Father's Nationality (57)
1	0 6 0 9 9 2	3 7 0 8 5	1	1

NAME OF CHILD (50)

First	M.I. (70)	Last (71)
C H A R L I N D O	S	T O R R I O N

08235-GG-991JNR-01413-BI001
BEST POSSIBLE IMAGE

T0800823599101413071920220O1
WP000648247

BReN
03708-A92S607-7

Documentary
Stamp Tax Paid

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