

Municipal Form No. 102
(Revised 1983)REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(To be accomplished in Triplicate)

(Fill out completely, accurately and legibly in in or typewriter)

PROVINCE Bohol LOCAL CIVIL REGISTRY NO. 91-58CITY / MUNICIPALITY Maribojoc

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

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

1 Male ☒ 2 Female4. PLACE OF (Name of hospital/institution; if not in hospital, (City/Municipality) (Province)
BIRTH give street/barangay)

5a. TYPE OF BIRTH (Place 'X' an appropriate answer) 5b. IF MULTIPLE BIRTH, CHILD WAS

☒ 1 Single ☐ 2 Twin ☐ 3 Three or more ☐ 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 PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back)

Date November 23, 1989 Place Maribojoc, Bohol

13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 3:25 o'clock an/pm on the date stated above.Signature [Signature] Address Bood BHS - Maribojoc, BoholName in print VIRGINIA P. MEDEQUISOTitle or position Public Health Midwife Date March 21, 1991

14. INFORMANT

Signature [Signature] Address Poblacion, Maribojoc, BoholName in print MARIA MAGDOSARelationship to child Mother Date March 21, 1991

15a. PREPARED BY b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Signature [Signature] Signature [Signature]Name in print VIRGINIA P. MEDEQUISO Name in print RUBEN E. DELARMENTETitle or position Public Health Midwife Title or position Local Civil RegistrarDate March 21, 1991 Date [Signature]

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT b. DATE WHEN INFORMATION WAS SUPPLIED

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Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority