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MUNICIPAL FORM No. 102—(Revised Dec. 1, 1968) (TO BE ACCOMPLISHED IN DUPLICATE)

REPUBLIC OF THE PHILIPPINES

CERTIFICATE OF LIVE BIRTH

(FILL OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER)

Province: Leyte

City or Municipality: Ormoc

Register Number:
(a) Civil Registrar-General No. .....
(b) Local Civil Registrar No. 3594

1. PLACE OF BIRTH
a. PROVINCE: Leyte
b. CITY OR MUNICIPALITY: Ormoc
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address): Ormoc General Hospital
d. IS PLACE OF BIRTH INSIDE CITY LIMITS? YES ☒ NO ☐

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
a. PROVINCE: Leyte 3738A
b. CITY OR MUNICIPALITY: Ormoc 3738A
c. NUMBER AND STREET: Hermosilla Drive 1
d. IS RESIDENCE INSIDE CITY LIMITS? YES ☒ NO ☐
e. IS RESIDENCE ON A FARM? YES ☐ NO ☒ 2

CHILD

3. NAME (Type or print): First EDELINA Middle ZAPANTA Last BAGARINAO 12
4. SEX: F
5a. THIS BIRTH: SINGLE ☐ TWIN ☐ TRIPLET ☐
5b. IF TWIN OR TRIPLET, WAS CHILD: 1ST ☐ 2ND ☐ 3RD ☐
6. DATE OF BIRTH: Month 12 Day 11 Year 81 11

FATHER

7. NAME: First EDUARDO Middle TILLA Last BAGARINAO
RELIGION: C.C. 8. NATIONALITY: Fil. 8a. RACE: Brown 81
9. AGE (At time of this birth) Years: 22
10. BIRTHPLACE: Ormoc City
11a. USUAL OCCUPATION: 11b. KIND OF BUSINESS OR INDUSTRY 1

MOTHER

12. MAIDEN NAME: First Josefina Middle Bantogan Last Zapanta 22
RELIGION: M.C. 13. NATIONALITY: Fil. 13a. RACE: Brown
14. AGE (At time of this birth) Years: 18
15. BIRTHPLACE: Ormoc City
16. PREVIOUS DELIVERIES TO MOTHER (Do not include this birth): 0 Z90
a. How many children are now living? 1
b. How many other children were born alive but are now dead? 1
c. How many fetal deaths (fetuses born dead any time after conception)? 18

17a. INFORMANT'S SIGNATURE: Eduardo Bagarinao
b. NAME IN PRINT: EDUARDO BAGARINAO
c. ADDRESS: Hermosilla Drive, Ormoc City

18. MOTHER'S MAILING ADDRESS: (Number, Street, City or Municipality, Province) X0

19. ATTENDANT AT BIRTH

I HEREBY CERTIFY that I attended the birth of this child who was born alive at 10:38 o'clock A.M. on the date above indicated.
c. SIGNATURE:
b. NAME IN PRINT: ANA MARIE ADORNO, M.D.
c. ADDRESS: Ormoc General Hospital
d. DATE SIGNED BY ATTENDANT AT BIRTH: 12-11-81 1
e. TITLE OF ATTENDANT AT BIRTH:
☐ M. D. ☐ MIDWIFE
☐ NURSE ☐ OTHERS (Specify) 1

20. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:
a. SIGNATURE:
b. NAME IN PRINT:
c. TITLE OR POSITION:
d. DATE: 12-15-81

21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT: 40
b. DATE WHEN GIVEN NAME WAS SUPPLIED: 07

22a. LENGTH OF PREGNANCY: 40 COMPLETED WEEKS.
22b. WEIGHT AT BIRTH: 6 LBS. ..... OZ.
23. LEGITIMATE: ☐ YES ☐ NO 1

24. DATE AND PLACE OF MARRIAGE OF PARENTS (For legitimate birth): September 21 1981
(Month) Ormoc (Date) Leyte
City or Municipality ....., Province .....

25. THIS CERTIFICATE IS PREPARED BY:
SIGNATURE:
NAME IN PRINT:
TITLE OR POSITION:
DATE:

18—239 (SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES)

RESERVE FOR BINDING

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