


Municipal Form No. 102
(Revised 1983)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

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

PROVINCE <u>CEBU</u>		LOCAL CIVIL REGISTRY NO. <u>93-3275</u>	
CITY/MUNICIPALITY <u>CEBU CITY</u>			
1 NAME (First) <u>JOMARI</u> (Middle) <u>JOSEPH</u> (Last) <u>ALTIVO BARRERA</u>			
2 SEX (Place "x" on appropriate answer) <u>XX</u> 1 Male 2 Female		3 DATE OF BIRTH (Day) <u>04</u> (Month) <u>FEBRUARY</u> (Year) <u>1993</u>	
4 PLACE OF BIRTH (Name of Hospital/Institution; If not in hospital, give street/barangay) <u>CHONG HUA HOSPITAL</u>		(City/Municipality) <u>CEBU CITY</u> (Province) <u>CEBU</u>	
5 a TYPE OF BIRTH (Place "x" on appropriate answer) <u>X</u> 1 Single 2 Twin 3 Three or more		b IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Third, 4th, etc.	
6 MAIDEN (First) (Middle) (Last) NAME <u>JOCEL</u> <u>PARALSO</u> <u>ALTIVO</u>		7 NATIONALITY <u>FILIPINO</u>	
8 RELIGION <u>ROMAN CATHOLIC</u>			
9 NAME (First) (Middle) (Last) <u>MARIO</u> <u>MANCIO</u> <u>BARRERA</u>		10 NATIONALITY <u>FILIPINO</u>	
11 RELIGION <u>ROMAN CATHOLIC</u>			
12 DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back) <u>May 3, 1992, Baybay, Leyte</u>			
13 CERTIFICATE OF ATTENDANT AT BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>9:45</u> o'clock a.m./p.m. on the date stated above. Signature <u>MA. ASUNCION HIPOLITA B. LIBRE, M.D.</u> Address <u>c/o Chong Hua Hospital</u> Name in print <u>MA. ASUNCION HIPOLITA B. LIBRE, M.D.</u> Fuente <u>Osmena, Cebu City</u> Title or position <u>Attending Physician</u> Date <u>February 08, 1993</u>			
14 INFORMANT Signature <u>JOCEL ALTIVO BARRERA</u> Address <u>E. Jacinto Street,</u> Name in print <u>JOCEL ALTIVO BARRERA</u> <u>Baybay, Leyte</u> Relationship to child <u>MOTHER</u> Date <u>February 06, 1993</u>			
15 a. PREPARED BY Signature <u>BERNARDINA I. GERONA</u> Name in print <u>BERNARDINA I. GERONA</u> Title or position <u>Clerk-Record Section</u> Date <u>February 08, 1993</u>			
b RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR Signature <u>2678</u> Name in print <u>IVONE</u> Title or position <u>2678</u> Date <u>2/8/93</u>			
16 a 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.)

PROVINCE <u>Cebu</u>		Local Civil Registry No. <u>93103275</u>		Registration Status <u>1</u>	
CITY/MUNICIPALITY <u>Cebu City</u>					
RESERVE FOR BINDING	Child	17 Weight of Birth (In grams) <u>3,700 Grams</u>		18 Birth Order of Child Ex. First, Second, etc. <u>First</u>	
		19 a. Total Number of Children Born Alive <u>One</u>		b. How many children are now living including this birth? <u>One</u>	
		c. How many children were born alive but are now dead <u>None</u>			
		20 Usual Occupation <u>CASHIER</u>		21 Age at the time of this Birth <u>23</u> years old	
		22 Usual Residence (Barangay) (City/Municipality) (Province) <u>E. Jacinto Street, Baybay, Leyte</u>			
Mother	Father	23 Usual Occupation <u>SEAMAN</u>		24 Age at the time of this Birth <u>35</u> years old	
		25 Attendant of Birth (Place "x" on appropriate answer) <u>X</u> 1 Physician 2 Nurse 3 Midwife 4 Healer 5 Others			
		Sex <u>1</u> Date of Birth <u>02/09/93</u> Place of Birth <u>22178</u> Mother's Nationality <u>1</u> Father's Nationality <u>1</u>			
NAME OF CHILD First <u>JOMARI</u> M.I. <u>JOSEPA</u> Last <u>BARRERA</u>					

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BEST POSSIBLE IMAGE



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CARMELITA N. ERICTA
 Administrator and Civil Registrar General
 National Statistics Office
