



Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

(Copy for OCRG)

REMARKS/ANNOTATION	
<p>Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL 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.)</p>	
Province <u>Cavite</u>	Registry No. <u>5038</u>
City/Municipality <u>Bacoor</u>	
1. NAME <u>KYLE ZITELLE</u> <u>CANTOLA</u> <u>ZITELLA</u>	For OCRG USE ONLY: Population Reference No. <u>2103-A98W108-2</u>
2. SEX <u>1 Male</u> <u>2 Female</u>	3. DATE OF BIRTH <u>1</u> (day) <u>Nov</u> (month) <u>1998</u> (year)
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) <u>St. Dominic Medical Center Talaba Bacoor Cavite</u>	TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
5a. TYPE OF BIRTH <u>1 Single</u> <u>2 Twin</u> <u>3 Triplet, etc.</u>	b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> <u>2 Second</u> <u>3 Others, Specify</u>
c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>first</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>3280</u> grams
6. MAIDEN NAME (First) <u>Laerni</u> (Middle) <u>Beltran</u> (Last) <u>Canoza</u>	41 <u>48101510318</u>
7. CITIZENSHIP <u>Filipino</u>	48 <u>1</u> 50 <u>00000098</u>
8. RELIGION <u>Catholic</u>	56 <u>211030</u>
9a. Total number of children born alive: <u>1</u>	b. No. of children still living including this birth: <u>1</u>
c. No. of children born alive but are now dead: <u>0</u>	61 <u>1</u>
10. OCCUPATION <u>None</u>	11. Age at the time of this birth: <u>18</u> years
12. RESIDENCE (House No., Street, Barangay) <u>0232 Progressive Vill. 18</u> (City/Municipality) <u>Molino 1</u> (Province) <u>Bacoor Cavite</u>	62 <u>01</u> 64 <u>32810</u>
13. NAME (First) <u>Stephen</u> (Middle) <u>Martin</u> (Last) <u>Zabala</u>	68 <u>1</u> 69 <u>1</u>
14. CITIZENSHIP <u>Filipino</u>	70 <u>01</u> 72 <u>01</u> 74 <u>00</u>
15. RELIGION <u>Catholic</u>	76 <u>290</u> 78 <u>18</u>
16. OCCUPATION <u>Employee</u>	81 <u>211030</u>
17. Age at the time of this birth: <u>19</u> years	86 <u>1</u> 87 <u>1</u> 88 <u>2480</u>
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Aug. 22, 1998 - Bacoor, Cavite</u>	89 <u>389</u> 91 <u>119</u>
19a. ATTENDANT <u>1 Physician</u> <u>2 Nurse</u> <u>3 Midwife</u> <u>4 Hilot (Traditional Midwife)</u> <u>5 Others (Specify)</u>	93 <u>1</u> 94 <u>08-22-98</u>
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>7:13pm</u> o'clock am/pm on the date stated above. Signature <u>[Signature]</u> Address <u>SDMC Talaba Bacoor Cavite</u> Name in Print <u>OB GYN</u> Date <u>11/1/98</u> Title or Position _____	96 <u>1</u> 97 <u>21030</u>
20. INFORMANT Signature <u>[Signature]</u> Address <u>0232 Prog. Vill. 18 Molino 1 Bacoor, Cavite</u> Name in Print <u>Stephen M. Zabala</u> Date <u>11/1/98</u> Relationship to the child <u>father</u>	98 <u>1</u> 99 <u>08-22-98</u>
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>Lyn A. Castillo</u> Title or Position <u>Medical Records Clerk</u> Date <u>11/3/98</u>	22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>[Signature]</u> Title or Position <u>11-3-98</u> Date <u>11-3-98</u>

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

