



Municipal Form No. 102
(Revised 1988)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(To be accomplished in triplicate)

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

PROVINCE Pangasinan LOCAL CIVIL REGISTRY NO. 92-1780

CITY/MUNICIPALITY Urdaneta

1. NAME (First) (Middle) (Last)
ALEXANDER EPISTOLA ESTONILO

2. SEX (Place 'X' on appropriate answer)
☒ 1 Male ☐ 2 Female

3. DATE OF BIRTH (Day) (Month) (Year)
08, July 1992

4. PLACE OF (Name of Hospital/Institution: if not in/
BIRTH hospital, give street/barangay) (City/Municipality) (Province)
Don Amadeo J. Perez Sr. Memorial General Hospital - Urdaneta, Pangasinan

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) b. 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)
Magdalena Lazaro Epistola

7. NATIONALITY Filipino 8. RELIGION Roman Catholic

9. NAME (First) (Middle) (Last)
Antonio Dules Estonilo

10. NATIONALITY Filipino 11. RELIGION Roman Catholic

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back).
June 19, 1983 - Urdaneta, Pangasinan

13. CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at 2:00 o'clock a.m./p.m. on the date stated above.

Signature [Signature] Address Don Amadeo J. Perez Sr. Memorial
Name in print NOEL J. OBEDONZA, MD. General Hospital-Urdaneta, Pang.
Title or position Resident Physician Date July 08, 1992

14. INFORMANT
Signature [Signature] Address Bayasas, Urdaneta, Pangasinan
Name in print ANTONIO ESTONILO Date July 08, 1992
Relationship to child Father

15a. PREPARED BY b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature [Signature] Signature [Signature]
Name in print ARIELA M. FERRER Name in print ROMEO S. MONTE, SR. 2650
Title or position Registered Midwife Title or position APC/Local Civil Registrar
Date July 08, 1992 Date 7-9-92

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)

PROVINCE Pangasinan Local Civil Registry No. 92-1780 Registration Status 7

CITY/MUNICIPALITY Urdaneta

17. Weight at Birth (In grams) 3969 Grams 18. Birth Order of Child (first, second, etc.) Fourth

19a. Total Number of Children Born Alive 04 b. How many children are now living including this birth? 04 c. How many children were born alive but are now dead? 0

20. Usual Occupation Housekeeper 21. Age at the time of this Birth 35 Yrs.

22. Usual Residence (Barangay) Bayasas City/Municipality Urdaneta (Province) Pangasinan

23. Usual Occupation Self-employed 24. Age at the time of this Birth 34 Yrs.

25. Attendant at Birth (Place 'X' on appropriate answer) ☒ 1 Physician ☐ 2 Nurse ☐ 3 Midwife ☐ 4 Midwife ☐ 5 Others

Sex 1 Date of Birth 080792 Place of Birth USA 67 Mother's Nationality 1 Father's Nationality 1

NAME OF CHILD First M.I. Last
ALEXANDER E ESTONILO

"IPAKITA SA MUNDO, UMAASENSO NA TAYO"

07082-AD-102FDB-00023-BI001

BEST POSSIBLE IMAGE



T102070821020002305232019001
HN900168588

BReN
05546-A92N801-4

Documentary
Stamp Tax Paid

[Signature]
JOSIE B. PEREZ
Assistant Secretary
(Officer-in-Charge)

