

(Copy for OCRG)

Municipal Form No. 102  
(Revised January 1993)

(To be accomplished by the Registrar)

REMARKS/ANNOTATION

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.)

Province DAVAO DEL SURRegistry No. 001-0036City/Municipality DAVAO CITY

C H I L D	1. NAME (First) (Middle) (Last) <u>ANGELITO JR. MORENO RANAN</u>		
	2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>21 February 2004</u>
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Brgy. 5-A Madapo Hills, Bankerohan, Davao City</u>		
	5a. TYPE OF BIRTH <input type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify _____
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>Third</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3084</u> grams
M O T H E R	6. MAIDEN NAME (First) (Middle) (Last) <u>LOSITA BAJENTING MORENO</u>		
	7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Catholic</u>
	9a. Total number of children born alive: <u>03</u>	b. No. of children still living including this birth: <u>03</u>	c. No. of children born alive but are now dead: <u>00</u>
	10. OCCUPATION <u>Housekeeper</u>		11. Age at the time of this birth: <u>34</u> years
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Brgy. 5-A Madapo Hills, Bankerohan, Davao City</u>		
F A T H E R	13. NAME (First) (Middle) (Last) <u>ANGELITO SR. DELA PERA RANAN</u>		
	14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Catholic</u>
	16. OCCUPATION <u>Laborer</u>		17. Age at the time of this birth: <u>30</u> years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)

October 28, 1996 - Saint Paul Parish, Matina Davao City

19a. ATTENDANT

☒ 1 Physician ☐ 2 Nurse ☐ 3 Midwife  
☐ 4 Helet (Traditional Midwife) ☐ 5 Others (Specify) \_\_\_\_\_

19b. CERTIFICATION OF BIRTH

I hereby certify that I attended the birth of the child who was born alive at 11:45 AM o'clock am/pm on the date stated above.

Signature \_\_\_\_\_  
Name in Print SOPIA S. JANDAYAN  
Title or Position TRAD. MIDWIFE

Address Atia St. Blk. 35, Phase I MA Bangkal, Davao City  
Date March 3, 2004

20. INFORMANT

Signature \_\_\_\_\_  
Name in Print ANGELITO SR. D. RANAN  
Relationship to the child FATHER

Address Brgy. 5-A Madapo Hills Bankerohan, Davao City  
Date March 3, 2004

21. PREPARED BY

Signature \_\_\_\_\_  
Name in Print TERESITA P. ONG  
Title or Position local reg. asst.  
Date March 3, 2004

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature \_\_\_\_\_  
Name in Print ELVIRA O. CASTLE  
Title or Position Registration Officer IV Chief Birth Division  
Date MAR 4 5 2004

For OCRG USE ONLY:  
Population Reference No.TO BE FILLED UP AT THE  
OFFICE OF THE CIVIL  
REGISTRAR

41

48

49 50

56

61

62 64

66 68

70 72 74

76 78

81

86 87

88 91

93

94

05373-G1-700DFM-00586-BI001

BEST POSSIBLE IMAGE



T70053737000058609172014001

A.100787620

BRen

02402-804CMOK-8

Documentary  
Stamp Tax Paid

Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General  
Philippine Statistics Authority