

(Copy for OCR)

Municipal Form No. 102
(Revised January 1993)

(To be accomplished in quadruplicate)

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 15a.)

Province RomblonCity/Municipality Romblon

Registry No.

95-480

CHILD	1. NAME (First) (Middle) (Last) <u>EMAN</u> <u>VILLANUEVA</u> <u>IMBOD</u>	For OCR USE ONLY: Population Reference No. <u>5910-A95J101-8</u>	
	2. SEX <u>X</u> 1 Male <u> </u> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>2</u> <u>May</u> <u>1995</u>
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Romblon District Hospital Romblon Romblon</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR <u>9500 480</u> <u>45-480</u>
	5a. TYPE OF BIRTH <u>X</u> 1 Single <u> </u> 2 Twin <u> </u> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <u> </u> 1. First <u> </u> 2. Second <u> </u> 3. Others, Specify <u> </u>
MOTHER	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>Sixth</u> (first, second, third, etc.)	d. WEIGHT AT BIRTH <u>3200</u> grams	
	6. MAIDEN NAME (First) (Middle) (Last) <u>FE</u> <u>MAPA</u> <u>VILLANUEVA</u>	7. CITIZENSHIP <u>FILIPINO</u>	
	8. RELIGION <u>R.C.</u>	9a. Total number of children born alive: <u>6</u>	
	b. No. of children still living including this birth: <u>6</u>	c. No. of children born alive but are now dead: <u>0</u>	
FATHER	10. OCCUPATION <u>Housekeeper</u>	11. Age at the time of this birth: <u>35</u> years	
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Capacian</u> <u>Romblon</u> <u>Romblon</u>	13. NAME (First) (Middle) (Last) <u>EUTQUIO</u> <u>RODELAS</u> <u>IMBOD</u>	
	14. CITIZENSHIP <u>FILIPINO</u>	15. RELIGION <u>R.C.</u>	
	16. OCCUPATION <u>BUSINESSMAN</u>	17. Age at the time of this birth: <u>35</u> years	

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

January 6, 1979, Romblon, Romblon

19a. ATTENDANT
X 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 3:50 P.M. o'clock am/pm on the date stated above.)

Signature [Signature]
Name in Print JUAN M. MONTAÑA, D.
Title or Position Private Physician

Address Romblon, Romblon
Date May 12, 1995

20. INFORMANT

Signature [Signature]
Name in Print EUTQUIO IMBOD
Relationship to the child Father

Address Bapacan, Romblon
Date May 12, 1995

21. PREPARED BY

Signature [Signature]
Name in Print LINDA G. POLENTINO
Title or Position Medical Records Officer
Date May 12, 1995

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR

Signature [Signature]
Name in Print VIRLETA G. MONTAÑA
Title or Position Asst. Reg. Officer
Date May 15, 1995

06731-28-003RCG-00189-BI001

BEST POSSIBLE IMAGE



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BRaN

05910-A95J202-8

Documentary
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Lisa Grace S. Bersales

LISA GRACE S. BERSALES, Ph.D.

National Statistician and Civil Registrar General
Philippine Statistics Authority

