

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 LAGUNA  
CITY/MUNICIPALITY BINAN

LOCAL CIVIL REGISTRY NO. 92-0563

1. NAME <u>MACY</u>	(First)  (Middle) <u>DONATO</u>	(Last)  <u>STO. DOMINGO</u>	
2. SEX (Place 'X' on appropriate answer) <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female	3. DATE OF BIRTH (Day)  <u>10</u>	(Month)  <u>JAN</u>	(Year)  <u>1992</u>
4. PLACE OF (Name of Hospital/Institution: if not in/ BIRTH hospital, give street/barangay)  <u>COMMUNITY CLINIC</u> <u>SOUTH CITY HOMES</u>	(City/Municipality)  <u>BINAN</u>	(Province)  <u>LAGUNA</u>	
5a. TYPE OF BIRTH (Place 'X' on appropriate answer) <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Three or more.	b. IF MULTIPLE BIRTH, CHILD WAS  <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Third, 4th, etc		
6. MAIDEN NAME <u>LEONORA</u>	(First) <u>DAVID</u>	(Middle) <u>DONATO</u>	(Last)
7. NATIONALITY <u>FILIPINO</u>	8. RELIGION <u>R. CATHOLIC</u>		
9. NAME <u>RENEECHITO MERCADER</u>	(First) <u>STO. DOMINGO</u>	(Middle)	(Last)
10. NATIONALITY <u>FILIPINO</u>	11. RELIGION <u>R. CATHOLIC</u>		
12. DATE AND PLACE OF MARRIAGE OF PARENTS(Important if not applicable, fill Affidavit of Acknowledgment at the back). <u>MARCH 30, 1987</u> <u>SACRED HEART QUEZON CITY</u>			

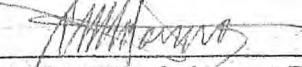
13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 12:50 P.M. o'clock a.m./p.m. on the date stated above.

Signature   
Name in print MYRNA DIMARANAN  
Title or position REG. MIDWIFE

Address COMMUNITY CLINIC  
SOUTH CITY HOMES    BINAN, LAGUNA  
Date

14. INFORMANT

Signature   
Name in print RENEECHITO M. STO. DOMINGO  
Relationship to child FATHER

Address SOUTH CITY HOMES  
BINAN, LAGUNA  
Date

15a. PREPARED BY

Signature   
Name in print MYRNA DIMARANAN  
Title or position REG. MIDWIFE  
Date FEB. 4, 1992

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Signature   
Name in print \_\_\_\_\_  
Title or position \_\_\_\_\_  
Date 20 FEB 92

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

b. DATE WHEN INFORMATION WAS SUPPLIED

REPUBLIC OF THE PHILIPPINES

(To be accomplished in triplicate)

## CERTIFICATE OF LIVE BIRTH

out completely, accurately and legibly in ink or typewriter)

LOCAL CIVIL REGISTRY NO. 92-0563(Middle)  
DONATO(Last)  
STO. DOMINGO3. DATE OF BIRTH (Day) 10 (Month) JAN (Year) 1992tion: if not in/  
angay)

(City/Municipality)

(Province)

SOUTH CITY HOMES

BIÑAN LAGUNA

priate answer)

b. IF MULTIPLE BIRTH, CHILD WAS

Three or more.

       1 First           2 Second           3 Third, 4th, etc(Last)  
DONATO7. NATIONALITY  
FILIPINO8. RELIGION  
R. CATHOLIC(Last)  
DER STO.DOMINGO10. NATIONALITY  
FILIPINO11. RELIGION  
R. CATHOLIC

PARENTS(Important if not applicable, fill Affidavit of Acknowledgment at the back).

37 SACRED HEART QUEZON CITY

BIRTH

the birth of the child who was born alive at 12:50 P.M. o'clock a.m./p.m. on the date stated above.RANAN  
WIFEAddress COMMUNITY CLINIC  
SOUTH CITY HOMES BIÑAN, LAGUNA

Date \_\_\_\_\_

STO. DOMINGO  
WIFEAddress SOUTH CITY HOMES  
BIÑAN, LAGUNA

Date \_\_\_\_\_

ARANAN  
WIFE  
992  
MENTAL REPORT

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Signature [Signature]Name in print [Signature]Title or position [Signature]Date 2-7-92

b. DATE WHEN INFORMATION WAS SUPPLIED