



Form No. 100
(Revised 1983)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

SAVA REGISTRATION DIVISION
AUG 7 1986
40478

PROVINCE Negros Oriental

LOCAL CIVIL REGISTRY NO. 86-1879

CITY/MUNICIPALITY Dumaguete City

1. NAME (First) <u>ANTHONY</u> (Middle) <u>PILAD</u> (Last) <u>JUGO</u>	2. SEX (Place 'X' on appropriate answer) <u>X</u> 1 Male <u>2</u> Female	3. DATE OF BIRTH (Day) <u>29</u> (Month) <u>July</u> (Year) <u>1936</u>
4. PLACE OF BIRTH (Name of Hospital/Institution: if not in hospital, give street/barangay) <u>Negros Oriental Provincial Hospital</u>		(City/Municipality) <u>Dumaguete City</u> (Province)
5a. TYPE OF BIRTH (Place 'X' on appropriate answer) <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Three or more		5b. IF MULTIPLE BIRTH, CHILD WAS 1 First <u>2</u> Second <u>3</u> Third, 4th, etc.
6. MAIDEN NAME (First) <u>Rosalita</u> (Middle) <u>Russiana</u> (Last) <u>Piedad</u>	7. NATIONALITY <u>Filipino</u>	8. RELIGION <u>Roman Catholic</u>
9. NAME (First) <u>Eutiquiano</u> (Middle) <u>Iral</u> (Last) <u>Jugo</u>	10. NATIONALITY <u>Filipino</u>	11. RELIGION <u>Roman Catholic</u>
12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: if not applicable, fill Affidavit of Acknowledgment at the back) Date: <u>April 25, 1985</u> Place: <u>Santander, Cebu</u>		
13. CERTIFICATE OF ATTENDANT AT BIRTH I hereby certify that I attended the birth of the child who was born alive at 1:10 a.m./p.m. on the date stated, above.		

Signature W. Villanar Address Negros Oriental Provincial Hospital
Name in print WENCHIT B. VILLANAR, M.D. Dumaguete City
Title or position Resident Physician Date July 2, 1986

14. INFORMANT
Signature Eutiquiano Jugo Address Santander, Cebu
Name in print EUTIQUIANO JUGO Date July 1986
Relationship to child Father

15. PREPARED BY
Signature Myra Flor b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Name in print MYRA FLOR Signature 3780
Title or position Rec. Librarian Name in print SAULDA B. JOMALBA
Date July 31, 1986 Title or position ASSISTANT LOCAL CIVIL REGISTRAR
Date AUG 7 1986

16. INFORMATION GIVEN IN SUPPLEMENTAL REPORT
/ect

(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 <u>Negros Oriental</u>		Local Civil Registry No. <u>8601879</u>	Registration Status <u>1</u>
CITY/MUNICIPALITY <u>Dumaguete City</u>		3780	
17. Weight at Birth (in grams) <u>3,420</u>	18. Birth Order of Child Ex. first, second, etc. <u>1st</u>		
19a. Total Number of Children Born Alive <u>1</u>	19b. How many children are now living including this birth? <u>1</u>	19c. How many children were born alive but are now dead? <u>0</u>	
20. Usual Occupation <u>Gov't Employee</u>	21. Age at the time of this Birth <u>31</u>		
22. Usual Residence (Barangay) <u>Poblacion, Dumaguete</u>	(City/Municipality) <u>Santander</u> (Province) <u>Cebu</u>		
23. Usual Occupation <u>None</u>	24. Age at the time of this Birth <u>31</u>		
25. Attendant of Birth (Place 'X' on appropriate answer) <u>X</u> 1 Physician <u>2</u> Nurse <u>3</u> Midwife <u>4</u> Healer <u>5</u> Others			
Sex <u>1</u>	Date of Birth <u>29.07.86</u>	Place of Birth <u>860102</u>	Mother's Nationality <u>1</u> Father's Nationality <u>1</u>
NAME OF CHILD First <u>ANTHONY</u> M.I. <u>P</u> Last <u>JUGO</u>			

04290-G1-429ATF-00046-BI001

BEST POSSIBLE IMAGE



T429042904290004609302011001
GH800373664

BReN
04610-A86NV04-6

Documentary
Stamp Tax Paid

Carmelita N. ERICTA
CARMELITA N. ERICTA
Administrator and Civil Registrar General
National Statistics Office