

LIVE BIRTH DATA

CHILD	1. NAME (First) (Middle) (Last)		
	2. SEX (Male #Female)	3. DATE OF BIRTH (Day) (Month)* (Year)	
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay)		(City/Municipality) (Province)
	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.)	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.)	5c. BIRTH ORDER (Order of this birth to previous live births including fetal death) (First, Second, Third, etc.)
			6. WEIGHT AT BIRTH _____ grams

MOTHER	7. MAIDEN NAME (First) (Middle) (Last)		
	8. CITIZENSHIP		9. RELIGION/RELIGIOUS SECT
	10a. Total number of children born alive	10b. No. of children still living including this birth	10c. No. of children born alive but are now dead
	11. OCCUPATION		12. AGE at the time of this birth (completed years)
13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)			

FATHER	14. NAME (First) (Middle) (Last)		
	15. CITIZENSHIP	16. RELIGION/RELIGIOUS SECT	17. OCCUPATION
	18. AGE at the time of this birth (completed years)		19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)

20a. DATE (Month) (Day) (Year)	20b. PLACE (City / Municipality) (Province) (Country)
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21a. ATTENDANT

____ 1 Physician ____ 2 Nurse ____ 3 Midwife ____ 4 Hilot (Traditional Birth Attendant) ____ 5 Others (Specify) _____

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant/Hilot, etc.)

I hereby certify that I attended the birth of the child who was born alive at _____ am/pm on the date of birth specified above.

Signature _____ Address _____

Name in Print _____

Title or Position _____ Date _____

<p>22. CERTIFICATION OF INFORMANT</p> <p>I hereby certify that all information supplied are true and correct to my own knowledge and belief.</p> <p>Signature _____</p> <p>Name in Print _____</p> <p>Relationship to the Child _____</p> <p>Address _____</p> <p>Date _____</p>	<p>23. PREPARED BY</p> <p>Signature _____</p> <p>Name in Print _____</p> <p>Title or Position _____</p> <p>Date _____</p>
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