

## JAMAICA

Registrar General's  
Department

## BIRTH REGISTRATION FORM

Issue Date:

12th July, 2010

1. BIRTH IN THE DISTRICT OF:

MOUNT SALEM

2. PARISH: ST. JAMES

3. NO. NZ 315

4. Place of Birth:

CORNWALL REGIONAL HOSPITAL

5. Date of Birth: TENTH OCTOBER, 2009

6. Sex: FEMALE

7. Name of Child: JAMELIA SONYA \*\*\*

8. Physician or registered midwife in attendance:

NURSE Y PETERKIN-BIGBY

FATHER

9. Name and Surname: JEREMIAH SYLVESTER GRANT \*\*\*

10. Age at time of birth: 24 YEARS

11. Occupation: TRAINED TEACHER

12. Birthplace: SAINT CATHERINE

MOTHER

13. (a) Residence: ASKENISH

(b) Town/Village: nil

(c) Parish: HANOVER

14. No. of Children previously born to mother (a) Alive: nil

(b) Still-born: nil

15. Name and Surname: ANTONETTE KERON GRANT \*\*\*

Maiden Name: KELLY \*\*\*

16. Age at time of birth: 27 YEARS

17. Occupation: TRAINED TEACHER

18. Birthplace: SAINT JAMES

INFORMANT(S)

19. Name and Surname: ANTONETTE KERON KELLY GRANT \*\*\*

nil

20. Qualification: MOTHER

nil

21. (a) Residence: ASKENISH

nil

(b) Town/Village: nil

nil

(c) Parish: HANOVER

REGISTRAR'S CERTIFICATE

22. (a) Signed in my presence by said informant:

23. Witness: nil

24. Date: ELEVENTH OCTOBER, 2009

Signed by Registrar

Name if added after Registration of Birth

26. Name: nil

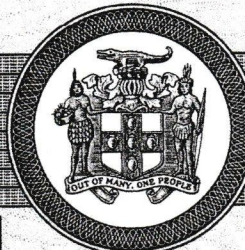
27. Authority: nil

28. Date Added: NIL

Last line of Vital Data



Patricia P. Holness

Registrar General &  
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE  
OF THE RECORD OFFICIALLY REGISTERED IN THE  
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE