010204138477/2013

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

Issue Date:
26th March, 2013

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **CHAPELTON** 2. PARISH: **CLARENDON**

3. NO. **HC 4981** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL CHAPELTON**

5. Date of Birth: **TENTH AUGUST, 2012** 6. Sex: **MALE**

7. Name of Child: **JADANIEL MALIK** ***

8. Physician or registered midwife in attendance: **NURSE V SOLOMON**

FATHER

9. Name and Surname: **EARL MALCOLM LEWARS** ***

10. Age at time of birth: **32 YEARS** 11. Occupation: **FARMER**

12. Birthplace: **CLARENDON**

MOTHER

13. (a) Residence: **NAIRNE CASTLE**

(b) Town/Village: **JAMES HILL** (c) Parish: **CLARENDON**

14. No. of Children previously born to mother (a) Alive: **1** (b) Still-born: **nil**

15. Name and Surname: **SOPHIA TERRIAN LEWARS** ***

Maiden Name: **BURNETT** *** 16. Age at time of birth: **25 YEARS**

17. Occupation: **CASHIER** 18. Birthplace: **ST ANN**

INFORMANT(S)

19. Name and Surname: **SOPHIA TERRIAN LEWARS** *** **nil**

20. Qualification: **MOTHER** **nil**

21. (a) Residence: **NAIRNE CASTLE** **nil**

(b)Town/Village: **JAMES HILL** **nil**

(c) Parish: **CLARENDON**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **THIRTEENTH AUGUST, 2012** **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

We aim to satisfy

Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

OUT OF MANY, ONE PEOPLE