

Registrar General's Department

Issue Date:
10th December, 2015

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: PORT ANTONIO		2. PARISH: PORTLAND
3. NO. DA 228	4. Place of Birth: PUBLIC GENERAL HOSPITAL PORT ANTONIO	
5. Date of Birth: SEVENTH APRIL, 2012	6. Sex: MALE	
7. Name of Child: see line 26		
First born of Twins		
8. Physician or registered midwife in attendance: DR M GALLA		
9. Name and Surname: ***** FATHER		
10. Age at time of birth: nil	11. Occupation: nil	
12. Birthplace: nil		
13. (a) Residence: NORWICH		
(b) Town/Village: PORT ANTONIO		
(c) Parish: PORTLAND		
14. No. of Children previously born to mother (a) Alive: 4		
(b) Still-born: nil		
15. Name and Surname: DIANNE SOPHIA COUSINS ***		
Maiden Name: nil		
16. Age at time of birth: 35 YEARS		
17. Occupation: SHOPKEEPER		
18. Birthplace: PORTLAND		
19. Name and Surname: DIANNE SOPHIA COUSINS ***		
20. Qualification: MOTHER		
21. (a) Residence: NORWICH		
(b) Town/Village: PORT ANTONIO		
(c) Parish: PORTLAND		
REGISTRAR'S CERTIFICATE		
22. (a) Signed in my presence by said informant:		
23. Witness: nil		
24. Date: EIGHTH APRIL, 2012		
Signed by Registrar		
Name if added after Registration of Birth		
26. Name: ROSHANE LAWAYNE WILSON ***		
27. Authority: CERTIFICATE OF NAMING		
28. Date Added: EIGHTH APRIL, 2012		
Last line of Vital Data		



Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS
PREPARED ON ENGRAVED BORDER
DISPLAYING EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERAL

Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

THIS 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