

JAMAICA

Registrar General's
DepartmentIssue Date:
16th June, 2010

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: MOUNT SALEM		2. PARISH: ST. JAMES	
3. NO: NZ 1867		4. Place of Birth: CORNWALL REGIONAL HOSPITAL	
5. Date of Birth: THIRD FEBRUARY, 2010		6. Sex: FEMALE	
7. Name of Child: MISCHICA JUSELLE DOWNER ***			
8. Physician or registered midwife in attendance: DOCTOR D SCARLETT			
9. Name and Surname: ***** FATHER			
10. Age at time of birth: nil		11. Occupation: nil	
12. Birthplace: nil MOTHER			
13. (a) Residence: RETRIEVE			
(b) Town/Village: CAMBRIDGE		(c) Parish: ST. JAMES	
14. No. of Children previously born to mother (a) Alive: 3		(b) Still-born: nil	
15. Name and Surname: MICHELLE HENRY ***			
Maiden Name: nil		16. Age at time of birth: 35 YEARS	
17. Occupation: DRESSMAKER		18. Birthplace: KINGSTON	
INFORMANT(S)			
19. Name and Surname: MICHELLE HENRY ***		nil	
20. Qualification: MOTHER		nil	
21. (a) Residence: RETRIEVE		nil	
(b) Town/Village: CAMBRIDGE		nil	
(c) Parish: ST. JAMES		UNKNOWN	

REGISTRAR'S CERTIFICATE

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

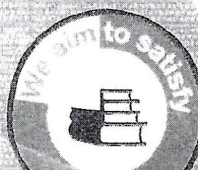
23. Witness: **nil**24. Date: **FOURTH FEBRUARY, 2010**

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

First Free Copy for children born
as of January 1, 2007 and registered
with a name at birth.**Initiative of GOJ - August 17, 2006**

Patricia P. Holness

Registrar General &
Deputy Keeper of the Records

THIS IS A CERTIFICATE

A5559731

