Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:
9th August, 2022

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM** 2. PARISH: **ST. JAMES**

3. NO. **NZ 720** 4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**

5. Date of Birth: **EIGHTH NOVEMBER, 2009** 6. Sex: **MALE**

7. Name of Child: **JORDANE D'JADE** ***

8. Physician or registered midwife in attendance: **NURSE M FULLER**

FATHER

9. Name and Surname: **RODNEY LLOYD SALMON** ***

10. Age at time of birth: **48 YEARS** 11. Occupation: **AUTO ELECTRICIAN**

12. Birthplace: **ST JAMES**

MOTHER

13. (a) Residence: **ANCHOVY**

(b) Town/Village: **nil** (c) Parish: **ST. JAMES**

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

15. Name and Surname: **MARIANN LOVINE SMITH** ***

Maiden Name: **ALLEN** *** 16. Age at time of birth: **27 YEARS**

17. Occupation: **HIGGLER** 18. Birthplace: **ST JAMES**

INFORMANT(S)

19. Name and Surname: **RODNEY LLOYD SALMON** *** **MARIANN LOVINE SMITH** ***

20. Qualification: **FATHER** **MOTHER**

21. (a) Residence: **MEGGIE TOP** **ANCHOVY**

(b)Town/Village: **SALT SPRING** **nil**

(c) Parish: **ST. JAMES** **ST. JAMES**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **EIGHTH NOVEMBER, 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

Charlton D. J. McFarlane
Registrar General &
Deputy Keeper of the Records

THIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

OUT OF MANY, ONE PEOPLE

We aim to satisfy

Registrar General's Department

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

B 0029324

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFIC