Cedrid Titus

Registrar General's Department

BIRTH REGISTRATION FORM

Date
uary 2014

Parish: TRELAWNY

Registration District: FALMOUTH

No.: OA 6551

Place of Birth: PUBLIC GENERAL HOSPITAL FALMOUTH

Sex: MALE

Date of Birth: TWELFTH SEPTEMBER 2013

Name of Child: NICKOY JOHNOY ***

Physician or registered midwife in attendance: NURSE N STUBBS

FATHER

Name and Surname: RAYON COLIN DOBSON ***

11. Occupation: POLICE CONSTABLE

10. Age at time of birth: 27 YEARS

Birthplace: ST ANN

MOTHER

13. (a) Residence: CLARKS TOWN

(c) Parish: TRELAWNY

(b) Town/Village: nil

14. No. of Children previously born to mother (a) Alive: 1

(b) Still-born: nil

15. Name and Surname: DAINTY ALICIA KENTON ***

16. Age at time of birth: 25 YEA

Maiden Name: nil

18. Birthplace: TRELAWNY

17. Occupation: HOMEDUTIES

INFORMANT(S)

19. Name and Surname: RAYON COLIN DOBSON *** | DAINTY ALICIA KENTON ***

20. Qualification: FATHER | MOTHER

21. (a) Residence: MAIN STREET | CLARKS TOWN

(b) Town/Village: STEER TOWN | nil

(c) Parish: ST ANN | TRELAWNY

REGISTRAR'S CERTIFICATE

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

23. Witness: nil

24. Date: THIRTEENTH SEPTEMBER, 2013

Signed by Registrar

Name if added after Registration of Birth

26. Name: nil

28. Date Added: NIL

27. Authority: nil

First Free Copy for chil
as of January 1, 2007 and re
with a name at birth.
Initiative of GOJ - August 17, 2

Last line of Vital Data

Deirdre English Gr se