

10203531670/2011

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF **MAY PEN** 2. PARISH **CLARENDON**

3. NO. **HA 8123** 4. Place of Birth **PUBLIC GENERAL HOSPITAL MAY PEN** 5. Sex **MALE**

6. Date of Birth **THIRTEENTH DECEMBER, 2010**

7. Name of Child **RANEEL ROBERT *****

8. Physician or registered midwife in attendance **NURSE C BAILEY-MARTIN**

9. Name and Surname **ROBERT ALPHEUS MCDANIEL ***** 10. Age at time of birth **41 YEARS** 11. Occupation **WELDER**

12. Birthplace **CLARENDON** 13. (a) Residence **OLD MONY MUSK** (c) Parish **CLARENDON**

(b) Town/Village **LIONEL TOWN** (b) Still-born **nil**

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

15. Name and Surname **ROSE MARIE WILLIS ***** 16. Age at time of birth **33 YEARS**

Maiden Name **nil** 17. Birthplace **ST ANN**

Occupation **DOMESTIC** 18. Informant(S) **ROSE MARIE WILLIS *****

Name and Surname **ROBERT ALPHEUS MCDANIEL ***** 19. MOTHER **ROSE MARIE WILLIS *****

Qualification **FATHER** 20. OLD MONY MUSK

(a) Residence **OLD MONY MUSK** 21. LIONEL TOWN

(b) Town/Village **LIONEL TOWN** 22. CLARENDON

(c) Parish **CLARENDON**

REGISTRAR'S CERTIFICATE

(a) Signed in my presence by said informant

23. Witness **nil** Signed by Registrar

24. Date **THIRTEENTH DECEMBER, 2010** Name if added after Registration of Birth

25. Name **nil** 26. Date Added **NIL**

27. Authority **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
Patricia P. Holness
Registrar General &
Deputy Keeper of the Records

