

JAMAICA

Registrar General's
DepartmentIssue Date:
6th January, 2012

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM**2. PARISH: **ST. JAMES**3. NO. **NZ 3832**4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**5. Date of Birth: **NINTH AUGUST, 2010**6. Sex: **MALE**7. Name of Child: **GREGORY ANTHONY *****8. Physician or registered midwife in attendance: **DOCTOR D WRIGHT**

FATHER

9. Name and Surname: **GREGORY ANTHONY WHITTER *****10. Age at time of birth: **25 YEARS**11. Occupation: **LABOURER**12. Birthplace: **SAINT JAMES**

MOTHER

13. (a) Residence: **ROSE HEIGHTS**(b) Town/Village: **MONTEGO BAY**(c) Parish: **ST. JAMES**14. No. of Children previously born to mother (a) Alive: **2**(b) Still-born: **nil**15. Name and Surname: **KADIAN MELESSE REID *****Maiden Name: **nil**16. Age at time of birth: **26 YEARS**17. Occupation: **SHOPKEEPER**18. Birthplace: **SAINT JAMES**

INFORMANT(S)

19. Name and Surname: **GREGORY ANTHONY WHITTER *******KADIAN MELESSE REID *****20. Qualification: **FATHER****MOTHER**21. (a) Residence: **ROSE HEIGHTS****ROSE HEIGHTS**(b) Town/Village: **MONTEGO BAY****MONTEGO BAY**(c) Parish: **ST. JAMES****ST. JAMES**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **TENTH AUGUST, 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

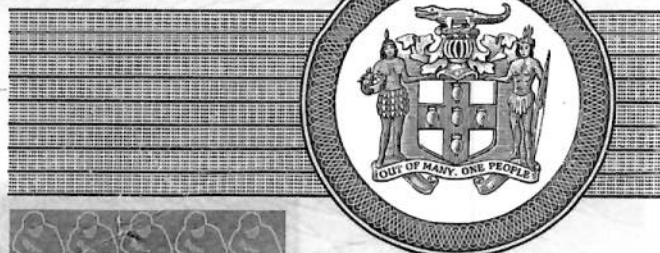


Registrar General's Department

for

Yvette Scott
Registrar General &
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

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