

Registrar General's
Department
BIRTH REGISTRATION FORM

ite:

ber, 2019

1. BIRTH IN THE DISTRICT OF: **SAVANNA-LA-MAR**

2. PARISH: **WESTMORELAND**

3. NO. **LA 6331**

4. Place of Birth: **PUBLIC GENERAL HOSPITAL SAVANNA-LA-MAR**

5. Date of Birth: **TWENTY-SECOND APRIL, 2010**

6. Sex: **MALE**

7. Name of Child: **see line 26**

8. Physician or registered midwife in attendance: **NURSE C PERRIN**

FATHER

9. Name and Surname: *****

10. Age at time of birth: **nil**

11. Occupation: **nil**

12. Birthplace: **nil**

MOTHER

13. (a) Residence: **NEW WORKS**

(b) Town/Village: **CARMEL**

(c) Parish: **WESTMORELAND**

14. No. of Children previously born to mother (a) Alive: **4**

(b) Still-born: **nil**

15. Name and Surname: **MARION TOMLINSON *****

16. Age at time of birth: **30 YEARS**

Maiden Name: **nil**

18. Birthplace: **WESTMORELAND**

17. Occupation: **FARMER**

INFORMANT(S)

9. Name and Surname: **MARION TOMLINSON *****

nil

20. Qualification: **MOTHER**

nil

21. (a) Residence: **NEW WORKS**

nil

(b) Town/Village: **CARMEL**

nil

(c) Parish: **WESTMORELAND**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TWENTY-THIRD APRIL, 2010**

Signed by Registrar

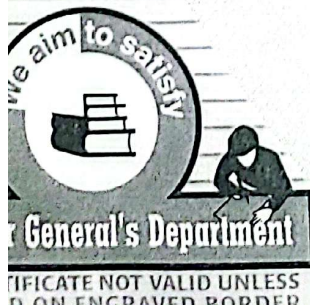
Name if added after Registration of Birth

26. Name: **KASHIVE OKARIE MITCHELL *****

28. Date Added: **TWENTIETH OCTOBER, 2010**

27. Authority: **CERTIFICATE OF NAMING**

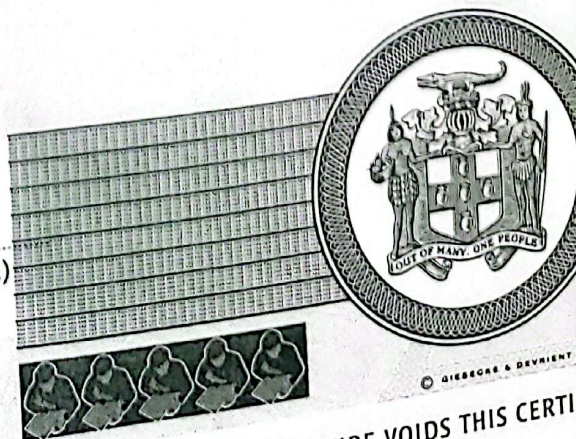
Last line of Vital Data



Desmond Davis (Actg.)

Registrar General &
Deputy Keeper of the Records

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



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