010206981484/2024

GOVERNMENT OF JAMAICA CERTIFICATION OF VITAL RECORD

Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:
4th April, 2024

1. Birth in the district of: BLACK RIVER
2. Parish: ST. ELIZABETH
3. No. KA 8339
4. Place of Birth: BORN BEFORE ARRIVAL PUBLIC GENERAL HOSPITAL BLACK
5. Date of Birth: FIRST FEBRUARY, 2010
6. Sex: MALE
7. Name of Child: see line 26

8. Physician or registered midwife in attendance: NURSE N ROBERTS

FATHER

9. Name and Surname: **********
10. Age at time of birth: nil
11. Occupation: nil
12. Birthplace: nil

MOTHER

13. (a) Residence: NORTHAMPTON
(b) Town/Village: SANTA CRUZ
(c) Parish: ST. ELIZABETH
14. No. of Children previously born to mother (a) Alive: 8
(b) Still-born: nil
15. Name and Surname: SONIA GAYE FARQUHARSON ***
Maiden Name: nil
16. Age at time of birth: 35 YEARS
17. Occupation: HOME DUTIES
18. Birthplace: ST ELIZABETH

INFORMANT(S)

19. Name and Surname: SONIA GAYE FARQUHARSON *** nil
20. Qualification: MOTHER nil
21. (a) Residence: NORTHAMPTON nil
(b)Town/Village: SANTA CRUZ nil
(c) Parish: ST. ELIZABETH

REGISTRAR'S CERTIFICATE

22. (a) Signed in my presence by said informant:
23. Witness: nil
24. Date: SECOND FEBRUARY, 2010 Signed by Registrar

NAME IF ADDED AFTER REGISTRATION OF BIRTH

26. Name: ZAHIME RAHIME ROBINSON ***
27. Authority: CERTIFICATE OF NAMING
28. Date Added: TWENTY-EIGHTH JANUARY, 2011

Last line of Vital Data

Charlton D. J. McFarlane
Registrar General &
Deputy Keeper of the Records
THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL

C 0383016 ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE