

Registrar General's Department

Issue Date:
21st January, 2015

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MANDEVILLE**

2. PARISH: **MANCHESTER**

3. NO. **IA 9222**

4. Place of Birth: **MANDEVILLE REGIONAL HOSPITAL**

5. Date of Birth: **FOURTEENTH NOVEMBER, 2011**

6. Sex: **MALE**

7. Name of Child: **TREVAUGHN DWAYNE HEWITT *****

8. Physician or registered midwife in attendance: **NURSE D MORIAH**

FATHER

9. Name and Surname: **TREVOR DOWEN HEWITT *****

10. Age at time of birth: **33 YEARS**

11. Occupation: **ENTERTAINER**

12. Birthplace: **TRELAUNY**

MOTHER

13. (a) Residence: **HIGHGATE HALL**

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

(c) Parish: **TRELAUNY**

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

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

15. Name and Surname: **JODIANN SHENNALA REID *****

Maiden Name: **SIMPSON *****

16. Age at time of birth: **22 YEARS**

17. Occupation: **HOUSEWIFE**

18. Birthplace: **MANCHESTER**

INFORMANT(S)

19. Name and Surname: **JODIANN SHENNALA SIMPSON REID *****

nil

20. Qualification: **nil**

nil

21. (a) Residence: **HIGHGATE HALL**

nil

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

nil

(c) Parish: **TRELAUNY**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **FIFTEENTH NOVEMBER, 2011**

Signed by Registrar

Name if added after Registration of Birth

26. Name: **nil**

27. Authority: **nil**

28. Date Added: **NIL**

***** AMENDMENTS *****

1: **LINES 9-12 ADDED on Thirteenth January, 2015**

Last line of Vital Data



Deirdre English Gosse

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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THIS CERTIFICATE NOT VALID UNLESS
PRINTED ON ENGRAVED BORDER
WITH EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERAL

A 7553383

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE