Registrar General's Department

Issue Date:
1st July, 2020

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **KINGSTON** 2. PARISH: **KINGSTON**

3. NO. **AA 615** 4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**

5. Date of Birth: **ELEVENTH MAY, 2008** 6. Sex: **FEMALE**

7. Name of Child: **JAYDA MARIE** ***

8. Physician or registered midwife in attendance: **NURSE B XIMINES**

FATHER

9. Name and Surname: **DALE FRANKLIN SMITH** ***

10. Age at time of birth: **30 YEARS** 11. Occupation: **TEACHER**

12. Birthplace: **ST JAMES**

MOTHER

13. (a) Residence: **8 WEST ANDERSON CRESCENT**

(b) Town/Village: **KINGSTON 11** (c) Parish: **ST. ANDREW**

14. No. of Children previously born to mother (a) Alive: **nil** (b) Still-born: **nil**

15. Name and Surname: **ELAINE MARIE MAXWELL** ***

Maiden Name: **nil** 16. Age at time of birth: **29 YEARS**

17. Occupation: **BANKER** 18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname:	**ELAINE MARIE MAXWELL** ***	**DALE FRANKLIN SMITH** ***
20. Qualification:	**MOTHER**	**FATHER**
21. (a) Residence:	**8 WEST ANDERSON CRESCENT**	**EDEN**
(b)Town/Village:	**KINGSTON 11**	**ANCHOVY**
(c) Parish:	**ST. ANDREW**	**ST. JAMES**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **ELEVENTH MAY, 2008** **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

Charlton D. J. McFarlane
Registrar General &
Deputy Keeper of the Records

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

We aim to satisfy
Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS PREPARED ON ENGRAVED BORDER DISPLAYING EMBOSSED SEALS AND SIGNATURE OF REGISTRAR GENERAL

OUT OF MANY, ONE PEOPLE

A 9375011

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE