



# Registrar General's Department

## BIRTH REGISTRATION FORM

Issue Date:

16th September, 2023

1. Birth in the district of: HALF WAY TREE

2. Parish: ST. ANDREW

3. No. BA 6176

4. Place of Birth: ANDREWS MEMORIAL HOSPITAL

5. Date of Birth: TWENTY-SECOND NOVEMBER, 2013

6. Sex: MALE

7. Name of Child: KAI ALEXANDER \*\*\*

8. Physician or registered midwife in attendance: DR K PALMER-COLE

9. Name and Surname: KEVIN ANTHONY WILLIAMS \*\*\* FATHER

10. Age at time of birth: 37 YEARS

11. Occupation: TEACHER

12. Birthplace: PORTLAND

13. (a) Residence: 8 BOUNDBROOK AVENUE

MOTHER

(b) Town/Village: PORT ANTONIO

(c) Parish: PORTLAND

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

nil

(b) Still-born: nil

15. Name and Surname: KENNECHA ANDREA DAVIS \*\*\*

Maiden Name: nil

16. Age at time of birth: 32 YEARS

17. Occupation: TEACHER

18. Birthplace: ST THOMAS

19. Name and Surname: KEVIN ANTHONY WILLIAMS \*\*\*

INFORMANT(S)

KENNECHA ANDREA DAVIS \*\*\*

20. Qualification: FATHER

MOTHER

21. (a) Residence: 8 BOUNDBROOK AVENUE

8 BOUNDBROOK AVENUE

(b) Town/Village: PORT ANTONIO

PORT ANTONIO

(c) Parish: PORTLAND

PORTLAND

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

REGISTRAR'S CERTIFICATE

23. Witness: nil

24. Date: TWENTY-FIFTH NOVEMBER, 2013

Signed by Registrar

26. Name: nil

NAME IF ADDED AFTER REGISTRATION OF BIRTH

27. Authority: nil

28. Date Added: NIL

Last line of Vital Data

Charlton D. J. McFarlane

Registrar General &  
Deputy Keeper of the RecordsTHIS CERTIFICATE IS NOT VALID UNLESS  
BEARING SIGNATURE OF THE REGISTRAR GENERAL