

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:

24th February, 2023

1. BIRTH IN THE DISTRICT OF: **KINGSTON**2. PARISH: **KINGSTON**3. NO. **AA 5104**4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**5. Date of Birth: **TWENTY-THIRD FEBRUARY, 2012**6. Sex: **FEMALE**7. Name of Child: **JASHWANIA SIMONE LYONS *****8. Physician or registered midwife in attendance: **NURSE S BARRETT-CARR**

FATHER

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

MOTHER

13. (a) Residence: **HARBOUR HEIGHTS**(b) Town/Village: **KINGSTON 17**(c) Parish: **ST. ANDREW**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **SHANTAL SIMONE ORGILL *****Maiden Name: **nil**16. Age at time of birth: **17 YEARS**17. Occupation: **NIL**18. Birthplace: **ST ANDREW**

INFORMANT(S)

19. Name and Surname: **SHANTAL SIMONE ORGILL *******nil**20. Qualification: **MOTHER****nil**21. (a) Residence: **HARBOUR HEIGHTS****nil**(b) Town/Village: **KINGSTON 17****nil**(c) Parish: **ST. ANDREW****UNKNOWN**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **TWENTY-FOURTH FEBRUARY, 2012**

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



Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS
PREPARED ON ENGRAVED BORDER
DISPLAYING EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERALCharlton D. J. McFarlane
Registrar General &
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE