



Registrar General's Department

Issue Date:
2nd May, 2023

BIRTH REGISTRATION FORM

1. Birth in the district of: **MANDEVILLE**

2. Parish: **MANCHESTER**

3. No. **IA 2021**

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

5. Date of Birth: **FIFTH MAY, 2010**

6. Sex: **MALE**

7. Name of Child: **DUJEAN JAMESI *****

8. Physician or registered midwife in attendance: **DOCTORS N McLEAN/S GREEN**

9. Name and Surname: **JAMES THADDEUS MAYNE *****

FATHER

10. Age at time of birth: **41 YEARS**

11. Occupation: **SALESMAN**

12. Birthplace: **CLARENDON**

MOTHER

13. (a) Residence: **TWEEDSIDE**

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

(c) Parish: **CLARENDON**

14. No. of Children previously born to mother (a) Alive: **3**

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

15. Name and Surname: **BOBETH MAGDALINE LAMB *****

Maiden Name: **CARROLL *****

16. Age at time of birth: **37 YEARS**

17. Occupation: **SHOPKEEPER**

18. Birthplace: **MANCHESTER**

19. Name and Surname: **JAMES THADDEUS MAYNE *****

INFORMANT(S)

BOBETH MAGDALINE LAMB ***

20. Qualification: **FATHER**

MOTHER

21. (a) Residence: **TWEEDSIDE**

TWEEDSIDE

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

SPALDINGS

(c) Parish: **CLARENDON**

CLARENDON

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **FIFTH MAY, 2010**

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. McFarlane

Charlton D. J. McFarlane

Registrar General &
Deputy Keeper of the Records

THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL

C 0053472

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE