130902005642/2006

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

Issue Date:
22nd May, 2007

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **CROSS ROADS** 2. PARISH: **ST. ANDREW**

3. NO. **BM 625** 4. Place of Birth: **NUTTALL MEMORIAL HOSPITAL**

5. Date of Birth: **NINTH OCTOBER, 2006** 6. Sex: **MALE**

7. Name of Child: **KAMAL ANTONIO HOGG *****

8. Physician or registered midwife in attendance: **DR J CHATOOR**

FATHER

9. Name and Surname: **NEVILLE ANTONIO HOGG *****

10. Age at time of birth: **25 YEARS** 11. Occupation: **MECHANIC**

12. Birthplace: **ST CATHERINE**

MOTHER

13. (a) Residence: **LOT 327 6 EAST 11TH STREET**

(b) Town/Village: **GREATER PORTMORE** (c) Parish: **ST. CATHERINE**

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

15. Name and Surname: **KAMILIA JOSEPHINE HAUGHTON *****

Maiden Name: **nil** 16. Age at time of birth: **21 YEARS**

17. Occupation: **CUSTOMER SERVICE REPRESENTATIVE** 18. Birthplace: **ST ANDREW**

INFORMANT(S)

19. Name and Surname:	nil	nil
20. Qualification:	nil	nil
21. (a) Residence:	nil	nil
(b)Town/Village:	nil	nil
(c) Parish:		

REGISTRAR'S CERTIFICATE

22. (b) Entered by me from the particulars on a Certificate received from: **KATHLEEN HENSLEY**
MATRON IN CHARGE

23. Witness: **nil**

24. Date: **EIGHTEENTH OCTOBER, 2006** **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 Eleventh May, 2007***

Last line of Vital Data

CERTIFIED TO BE A TRUE COPY
OF THE ORIGINAL
CAMPION COLLEGE
SIGNATURE
TITLE VP, Dean of Students
DATE 16/12/2024

Patricia P. Holness

Registrar General &
Deputy Keeper of the Records

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

Registrar General's Department

OUT OF MANY, ONE PEOPLE

© GIESECKE & DEVRIENT GMBH 2000

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE