10204242821/2013

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:
24th July, 2013

1. BIRTH IN THE DISTRICT OF: **BLACK RIVER** 2. PARISH: **ST. ELIZABETH**

3. NO. **KA 2776** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL BLACK RIVER**

5. Date of Birth: **TWENTY-SECOND MAY, 2013** 6. Sex: **FEMALE**

7. Name of Child: **TALIA KENIYA JOHNSON *****

8. Physician or registered midwife in attendance: **NURSE E EARLE**

FATHER

9. Name and Surname: **********

10. Age at time of birth: **nil** 11. Occupation: **nil**

12. Birthplace: **nil**

MOTHER

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

(b) Town/Village: **nil** (c) Parish: **ST. ELIZABETH**

14. No. of Children previously born to mother (a) Alive: **1** (b) Still-born: **nil**

15. Name and Surname: **KENESHA KERONA ANDERSON *****

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

17. Occupation: **SHOPKEEPER** 18. Birthplace: **ST ELIZABETH**

INFORMANT(S)

19. Name and Surname: **KENESHA KERONA ANDERSON *****

20. Qualification: **MOTHER**

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

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

(c) Parish: **ST. ELIZABETH**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TWENTY-SECOND MAY, 2013** **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

First Free Copy for children born as of January 1, 2007 and registered with a name at birth.

Initiative of GOJ - August 17, 2006

We aim to satisfy

Registrar General's Department

Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

THIS IS A CERTIFICATE

OUT OF MANY, ONE PEOPLE