

CERTIFICATION OF VITAL RECORD

Registrar General's Department - Jamaica

10203434634/2010

Issue Date:
6th January, 2011

BIRTH REGISTRATION FORM

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

3. NO. **BM 2789** 4. Place of Birth: **NUTTALL MEMORIAL HOSPITAL**

5. Date of Birth: **TWENTY-NINTH SEPTEMBER, 2010** 6. Sex: **FEMALE**

7. Name of Child: **CEIRA SAFIYA BLACK *****

8. Physician or registered midwife in attendance: **DR S MITCHELL**

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

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

12. Birthplace: **nil** MOTHER

13. (a) Residence: **APARTMENT 1 17 HOPEDALE AVENUE**

(b) Town/Village: **KINGSTON 6** (c) Parish: **ST. ANDREW**

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

15. Name and Surname: **KEISHA KARLMARLA WILLIAMS *****

Maiden Name: **nil** 16. Age at time of birth: **31 YEARS**

17. Occupation: **BANKER** 18. Birthplace: **ST JAMES**

INFORMANT(S)

19. Name and Surname: **KEISHA KARLMARLA WILLIAMS ***** nil

20. Qualification: **MOTHER** nil

21. (a) Residence: **APARTMENT 1 17 HOPEDALE AVENUE** nil

(b) Town/Village: **KINGSTON 6** nil

(c) Parish: **ST. ANDREW** **UNKNOWN**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **THIRTIETH SEPTEMBER, 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

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

Initiative of GOJ - August 17, 2006

A202501



This is a true and exact reproduction of the record officially registered in the Registrar General's Department of Jamaica.

Patricia P. Holness
Registrar General &
Deputy Keeper of the Records



This copy not valid unless prepared on engraved border displaying embossed seal and signature of Registrar General.