

Issue Date:
1st October, 2021

Registrar General's Department

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MANDEVILLE** 2. PARISH: **MANCHESTER**
3. NO. **IA 1822** 4. Place of Birth: **MANDEVILLE REGIONAL HOSPITAL**
5. Date of Birth: **TWENTY-FIFTH JANUARY, 2010** 6. Sex: **MALE**
7. Name of Child: **JORDAN DWAYNE *****
8. Physician or registered midwife in attendance: **NURSE MARIE COWAN**
9. Name and Surname: **EDMOND NICANOR JOHNSON ***** FATHER
10. Age at time of birth: **35 YEARS** 11. Occupation: **TAILOR**
12. Birthplace: **KINGSTON** MOTHER
13. (a) Residence: **WALES**
(b) Town/Village: **NEWPORT** (c) Parish: **MANCHESTER**
14. No. of Children previously born to mother (a) Alive: **2** (b) Still-born: **nil**
15. Name and Surname: **DELORES MERVA JOHNSON *****
Maiden Name: **THOMPSON ***** 16. Age at time of birth: **32 YEARS**
17. Occupation: **OFFICE ATTENDANT** 18. Birthplace: **MANCHESTER**
INFORMANT(S)
19. Name and Surname: **DELORES MERVA JOHNSON ***** nil
20. Qualification: **MOTHER** nil
21. (a) Residence: **WALES** nil
(b) Town/Village: **NEWPORT** nil
(c) Parish: **MANCHESTER** UNKNOWN
22. (a) Signed in my presence by said informant: REGISTRAR'S CERTIFICATE
23. Witness: **nil**
24. Date: **TWENTY-FIFTH JANUARY, 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



Registrar General's Department

Charlton D. J. McFarlane
Registrar General &
Deputy Keeper of the Records

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



A 9725558

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE