Registrar General's Department

Issue Date:
28th February, 2025

BIRTH REGISTRATION FORM

1. Birth in the district of: UNIVERSITY OF THE WEST INDIES — 2. Parish: ST. ANDREW

3. No. BY 2107 — 4. Place of Birth: UNIVERSITY HOSPITAL OF THE WEST INDIES

5. Date of Birth: SIXTH NOVEMBER, 2008 — 6. Sex: FEMALE

7. Name of Child: SACORYA GENYA-SÉHAVEN BUCHANAN ***

8. Physician or registered midwife in attendance: STAFF MIDWIFE C CHARLTON

FATHER

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

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

12. Birthplace: nil

MOTHER

13. (a) Residence: 222 OLYMPIC COURT
(b) Town/Village: KINGSTON 11 — (c) Parish: ST. ANDREW

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

15. Name and Surname: TANEISHA ANNMARIE REID ***
Maiden Name: nil — 16. Age at time of birth: 29 YEARS

17. Occupation: COSMETOLOGIST — 18. Birthplace: ST CATHERINE

INFORMANT(S)

19. Name and Surname: TANEISHA ANNMARIE REID *** — nil

20. Qualification: MOTHER — nil

21. (a) Residence: 222 OLYMPIC COURT — nil
(b)Town/Village: KINGSTON 11 — nil
(c) Parish: ST. ANDREW

REGISTRAR'S CERTIFICATE

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

23. Witness: nil

24. Date: SIXTH NOVEMBER, 2008 — 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

I certify that this is a true copy of the original document
O. Ferguson 18/8/25
O. G FERGUSON — Date
D02771

D Davis
Desmond Davis (Act.)

Registrar General &
Deputy Keeper of the Records
THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL