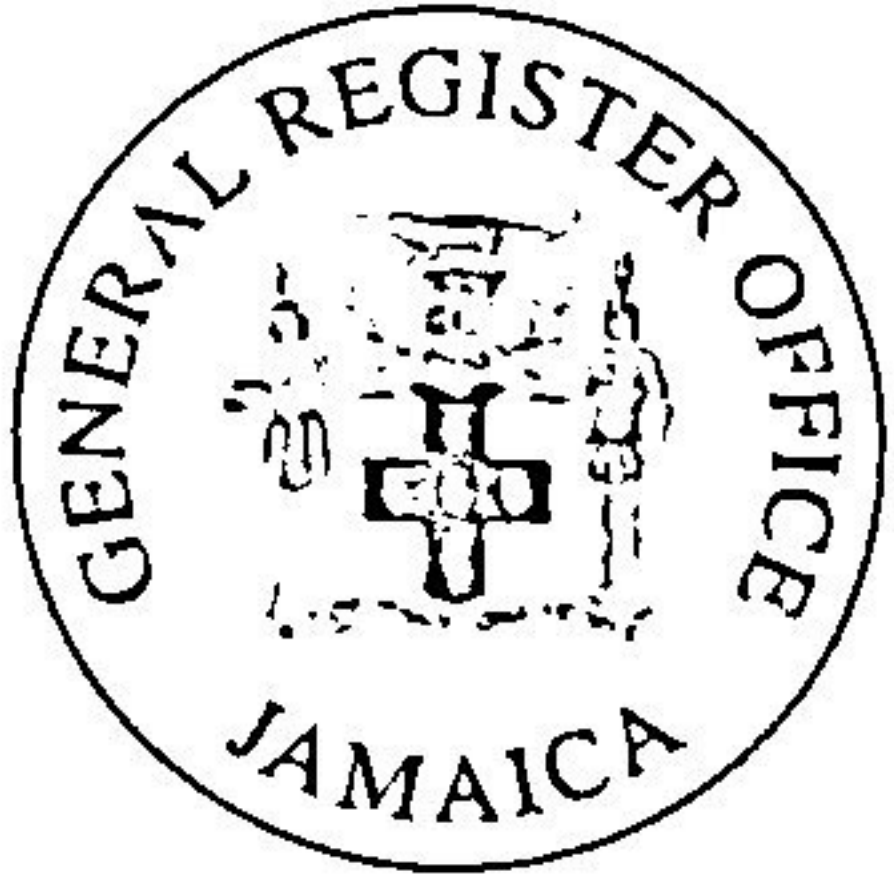




Registrar General's Department

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. L. G. FERGUSON 18/8/25

J. Davis

Desmond Davis (Act.)

Registrar General &
Deputy Keeper of the Records

THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL