

JAMAICA

Registrar General's
Department

Issue Date:

2nd December, 2011

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **PORT ANTONIO**2. PARISH: **PORTLAND**3. NO. **DA 9043**4. Place of Birth: **PUBLIC GENERAL HOSPITAL PORT ANTONIO**5. Date of Birth: **FIRST OCTOBER, 2010**6. Sex: **MALE**7. Name of Child: **JAEDEN MARC-ANTHONY *****8. Physician or registered midwife in attendance: **NURSE V KERR**9. Name and Surname: **HOWARD ANTHONY SMELLIE *****
FATHER10. Age at time of birth: **27 YEARS**11. Occupation: **TAXI OPERATOR**12. Birthplace: **PORTLAND**

MOTHER

13. (a) Residence: **BELLEVUE**(b) Town/Village: **RIO GRANDE**(c) Parish: **PORTLAND**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **DIANA JENNIFER WALTON *****Maiden Name: **nil**16. Age at time of birth: **24 YEARS**17. Occupation: **HOMEDUTIES**18. Birthplace: **PORTLAND**

INFORMANT(S)

19. Name and Surname: **HOWARD ANTHONY SMELLIE *******DIANA JENNIFER WALTON *****20. Qualification: **FATHER****MOTHER**21. (a) Residence: **BELLEVUE****BELLEVUE**(b) Town/Village: **RIO GRANDE****RIO GRANDE**(c) Parish: **PORTLAND****PORTLAND**

REGISTRAR'S CERTIFICATE

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

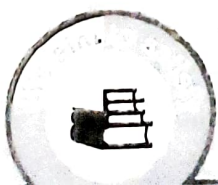
23. Witness: **nil**24. Date: **SECOND OCTOBER, 2010**

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

St. George's College
Office of the Lower School
Vice PrincipalHandwritten signature: *Anderson*
Date: *MAY 04, 2014*

for

Yvette Scott

Registrar General &
Deputy Keeper of the Records