

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:

19th September, 2008

1. BIRTH IN THE DISTRICT OF: **CROSS ROADS**2. PARISH: **ST. ANDREW**3. NO. **BM 1974**4. Place of Birth: **NUTTALL MEMORIAL HOSPITAL**5. Date of Birth: **TWENTY-SECOND JULY, 2008**6. Sex: **FEMALE**7. Name of Child: **SHIRAH-MOY TIANNA *****8. Physician or registered midwife in attendance: **DR J DALLAS**9. Name and Surname: **ARCHIBALD GEORGE CAMPBELL ***** FATHER10. Age at time of birth: **29 YEARS**11. Occupation: **MEDICAL TECHNOLOGIST**12. Birthplace: **WESTMORELAND**

MOTHER

13. (a) Residence: **184 ORANGE STREET BLOCK C APARTMENT 8**(b) Town/Village: **nil**(c) Parish: **KINGSTON**

14. No. of Children previously born to mother (a) Alive:

Not stated(b) Still-born: **Not stated**15. Name and Surname: **SHACKIRA TENEISHA CAMPBELL *****Maiden Name: **JARRETT *****16. Age at time of birth: **28 YEARS**17. Occupation: **COLLEGE STUDENT**18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **ARCHIBALD GEORGE CAMPBELL *******nil**20. Qualification: **FATHER****nil**21. (a) Residence: **184 ORANGE STREET BLOCK C APARTMENT 8****nil**(b) Town/Village: **nil****nil**(c) Parish: **KINGSTON**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **TWENTY-THIRD JULY, 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



Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS
PREPARED ON ENGRAVED BORDER
DISPLAYING EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERALRegistrar General &
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

A 4527995

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

