

JAMAICA
Registrar General's
Department
BIRTH REGISTRATION FORM

Issue Date:
6th October, 2007

1. BIRTH IN THE DISTRICT OF: **KINGSTON** 2. PARISH: **KINGSTON**
3. NO. **AA 3096** 4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**
5. Date of Birth: **THIRTY-FIRST JULY, 2007** 6. Sex: **MALE**
7. Name of Child: **ANDRE BOGLE *****

8. Physician or registered midwife in attendance: **NURSE B XIMINES**

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

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

12. Birthplace: **nil**

13. (a) Residence: **2 UPPER FIRST STREET** MOTHER

(b) Town/Village: **KINGSTON 12** (c) Parish: **ST. ANDREW**

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

15. Name and Surname: **SHEREIKA SATCHELL *****

Maiden Name: **nil**

16. Age at time of birth: **16 YEARS**

17. Occupation: **NIL** 18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **SHEREIKA SATCHELL ***** **nil**

20. Qualification: **MOTHER** **nil**

21. (a) Residence: **2 UPPER FIRST STREET** **nil**

(b) Town/Village: **KINGSTON 12** **nil**

(c) Parish: **ST. ANDREW** **UNKNOWN**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **THIRTY-FIRST JULY, 2007** Signed by Registrar

Name if added after Registration of Birth

25. Name: **nil**

27. Authority: **nil**

28. Date Added: **NIL**

Last line of Vital Data

First Free Copy for children born as of January 1, 2007 and registered with a name at birth.

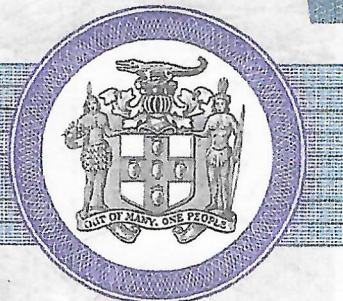
Initiative of GOJ - August 17, 2006

*Original copy seen
C. Swaby-Love
19/8/24*

Patricia P. Hoiness

Registrar General &
Deputy Keeper of the Records

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



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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

