080203201928/2023

GOVERNMENT OF JAMAICA CERTIFICATION OF VITAL RECORD

GENERAL REGISTER OFFICE JAMAICA

Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:
6th June, 2023

1. Birth in the district of: UNIVERSITY OF THE WEST INDIES
2. Parish: ST. ANDREW
3. No. BY 8690
4. Place of Birth: UNIVERSITY HOSPITAL OF THE WEST INDIES
5. Date of Birth: FIRST NOVEMBER, 2011
6. Sex: MALE
7. Name of Child: see line 26

8. Physician or registered midwife in attendance: STAFF MIDWIFE K ALLEN

FATHER

9. Name and Surname: MARVIS VAL IRVING ***
10. Age at time of birth: 30 YEARS
11. Occupation: ENTERTAINER
12. Birthplace: ST JAMES

MOTHER

13. (a) Residence: MOUNT OGLE
(b) Town/Village: LAWRENCE TAVERN
(c) Parish: ST. ANDREW
14. No. of Children previously born to mother (a) Alive: nil
(b) Still-born: nil
15. Name and Surname: NICOLE AMANDA REID ***
Maiden Name: nil
16. Age at time of birth: 22 YEARS
17. Occupation: HOME DUTIES
18. Birthplace: ST ANDREW

INFORMANT(S)

19. Name and Surname: NICOLE AMANDA REID *** MARVIS VAL IRVING ***
20. Qualification: MOTHER FATHER
21. (a) Residence: MOUNT OGLE HENDON GLENDEVON
(b)Town/Village: LAWRENCE TAVERN MONTEGO BAY
(c) Parish: ST. ANDREW ST. ANDREW

REGISTRAR'S CERTIFICATE

22. (a) Signed in my presence by said informant:
23. Witness: nil
24. Date: SECOND NOVEMBER, 2011

Signed by Registrar

NAME IF ADDED AFTER REGISTRATION OF BIRTH

26. Name: TAJOURN O'JARI ***
27. Authority: CERTIFICATE OF NAMING
28. Date Added: SEVENTH NOVEMBER, 2011

Last line of Vital Data

Charlton McFarlane

Charlton D. J. McFarlane
Registrar General &
Deputy Keeper of the Records

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

C 0088716 ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICA