

Issue Date:
3rd July, 2012

Department BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **HALF WAY TREE**

2. PARISH: **ST. ANDREW**

3. NO. **BA 4524**

4. Place of Birth: **ANDREWS MEMORIAL HOSPITAL**

5. Date of Birth: **EIGHTEENTH AUGUST, 2011**

6. Sex: **MALE**

7. Name of Child: **JOSIAH NATHANIEL *****

8. Physician or registered midwife in attendance: **DOCTOR M WILLIAMS**

FATHER

9. Name and Surname: **DOUGLAS LLOYD WAUGH *****

10. Age at time of birth: **27 YEARS**

11. Occupation: **CUSTOMER SERVICE REPRESENTATIVE**

12. Birthplace: **KINGSTON**

MOTHER

13. (a) Residence: **LOT 12 RHONE PARK ESTATE**

(b) Town/Village: **OLD HARBOUR**

(c) Parish: **ST. CATHERINE**

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

(b) Still-born: **nil**

15. Name and Surname: **SIMONE CHEVANITA WAUGH *****

Maiden Name: **McLEAN *****

16. Age at time of birth: **26 YEARS**

17. Occupation: **ULTRASONOGRAPHER**

18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **DOUGLAS LLOYD WAUGH *****

nil

20. Qualification: **FATHER**

nil

21. (a) Residence: **LOT 12 RHONE PARK ESTATE**

nil

(b) Town/Village: **OLD HARBOUR**

nil

(c) Parish: **ST. CATHERINE**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **NINETEENTH AUGUST, 2011**

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



for

Yvette Scott
Yvette Scott

Registrar General &
Deputy Keeper of the Records

Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS
PREPARED ON ENGRAVED BORDER
DISPLAYING EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERAL

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