

10203745083/2011

Issue Date:
4th January, 2012

JAMAICA Registrar General's Department

BIRTH REGISTRATION FORM

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

3. NO. **BA 4509**

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

7. Name of Child: **KAYLEE JANAE *****

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

2. PARISH: **ST. ANDREW**

6. Sex: **FEMALE**

8. Physician or registered midwife in attendance: **DR SHAWN WYNTER**

9. Name and Surname: **IAN OLLIE ELLIOTT *****

10. Age at time of birth: **40 YEARS**

11. Occupation: **TELECOMMUNICATION MANAGER**

12. Birthplace: **ST ELIZABETH**

13. (a) Residence: **LOT 345 1 NORTH**

(b) Town/Village: **GREATER PORTMORE**

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

15. Name and Surname: **JANICE ANGELA ELLIOTT *****

Maiden Name: **BARNES *****

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

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

17. Occupation: **CUSTOMER SERVICE MANAGER**

18. Birthplace: **ST ELIZABETH**

16. Age at time of birth: **41 YEARS**

19. Name and Surname: **JANICE ANGELA ELLIOTT *****

20. Qualification: **MOTHER**

21. (a) Residence: **LOT 345 1 NORTH**

(b) Town/Village: **GREATER PORTMORE**

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

22. (a) Signed in my presence by said informant: **REGISTRAR'S CERTIFICATE**

23. Witness: **nil**

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

Signed by Registrar

26. Name: **nil**

Name if added after Registration of Birth

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



Registrar General's Department

Yvette Scott
Yvette Scott

for

Registrar General &
Deputy Keeper of the Records

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



A 6168522

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

10203745083/2011

CERTIFICATION OF VITAL RECORD

Issue Date:
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BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: HALF WAY TREE
2. PARISH: ST. ANDREW
3. NO. BA 4509
4. Place of Birth: ANDREWS MEMORIAL HOSPITAL
5. Date of Birth: NINTH AUGUST, 2011
6. Sex: FEMALE
7. Name of Child: KAYLEE JANAE ***
8. Physician or registered midwife in attendance: DR SHAWN WYNTER
9. Name and Surname: IAN OLLIE ELLIOTT *** FATHER
10. Age at time of birth: 40 YEARS
11. Occupation: TELECOMMUNICATION MANAGER
12. Birthplace: ST ELIZABETH
13. (a) Residence: LOT 345 1 NORTH MOTHER
(b) Town/Village: GREATER PORTMORE
14. No. of Children previously born to mother (a) Alive: 1 (c) Parish: ST. CATHERINE
(b) Still-born: nil
15. Name and Surname: JANICE ANGELA ELLIOTT ***
Maiden Name: BARNES ***
16. Age at time of birth: 41 YEARS
17. Occupation: CUSTOMER SERVICE MANAGER
18. Birthplace: ST ELIZABETH
19. Name and Surname: JANICE ANGELA ELLIOTT *** INFORMANT(S)
20. Qualification: MOTHER nil
21. (a) Residence: LOT 345 1 NORTH nil
(b) Town/Village: GREATER PORTMORE nil
(c) Parish: ST. CATHERINE nil
22. (a) Signed in my presence by said informant: REGISTRAR'S CERTIFICATE
23. Witness: nil
24. Date: TENTH 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

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