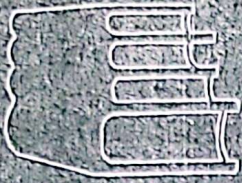


10204112020/2013

CERTIFICATION OF VITAL RECORD



JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date

25th February 2013

1. BIRTH IN THE DISTRICT OF **BLACK RIVER** PARISH **ST. ELIZABETH**
 3. NO. **KA 2138** 4. Place of Birth **PUBLIC GENERAL HOSPITAL BLACK RIVER**
 5. Date of Birth **TWENTY-FIRST NOVEMBER 2012** 6. Sex **MALE**
 7. Name of Child **ADRIAN SEMON *****

8. Physician or registered midwife in attendance **NURSE L. BROWN SALMON**9. Name and Surname **SEMON BASHAN GAYLE *****

FATHER

10. Age at time of birth **20 YEARS**11. Occupation **BUS CONDUCTOR**12. Birthplace **ST. ELIZABETH**

MOTHER

13. (a) Residence **SLIPE**(b) Town/Village **nil**(c) Parish **ST. ELIZABETH**14. No. of Children previously born to mother (a) Alive **1**(b) Still-born **nil**15. Name and Surname **OSHIN ABIGAIL DUNKLEY *****Maiden Name **nil**16. Age at time of birth **18 YEARS**17. Occupation **HOMEDUTIES**18. Birthplace **ST. ELIZABETH**

INFORMANT(S)

19. Name and Surname **OSHIN ABIGAIL DUNKLEY *******SEMON BASHAN GAYLE *****20. Qualification **MOTHER****FATHER**21. (a) Residence **SLIPE****SLIPE**(b) Town/Village **nil****nil**(c) Parish **ST. ELIZABETH****ST. ELIZABETH**

REGISTRAR'S CERTIFICATE

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

23. Witness **nil**24. Date **TWENTY-FIRST NOVEMBER 2012**

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



Deidre English Gosse

Registrar General &
Deputy Keeper of the Records