

Registrar General's Department

Issue Date:
27th August, 2015

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **SPANISH TOWN**

2. PARISH: **ST. CATHERINE**

3. NO. **EA 515**

4. Place of Birth: **PUBLIC GENERAL HOSPITAL SPANISH TOWN**

5. Date of Birth: **TWENTY-FIRST AUGUST, 2013**

6. Sex: **MALE**

7. Name of Child: **see line 26**

8. Physician or registered midwife in attendance: **DR TOWNSEND**

FATHER

9. Name and Surname: **CALVIN OLIVER *****

10. Age at time of birth: **54 YEARS**

11. Occupation: **UPHOLSTERER**

12. Birthplace: **ST ANN**

MOTHER

13. (a) Residence: **OLD ROAD**

(b) Town/Village: **KITSON TOWN**

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

14. No. of Children previously born to mother (a) Alive: **2**

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

15. Name and Surname: **DAWN MARCIA RICHARDS *****

Maiden Name: **nil**

16. Age at time of birth: **42 YEARS**

17. Occupation: **VENDOR**

18. Birthplace: **ST CATHERINE**

INFORMANT(S)

19. Name and Surname: **DAWN MARCIA RICHARDS *****

nil

20. Qualification: **MOTHER**

nil

21. (a) Residence: **OLD ROAD**

nil

(b) Town/Village: **KITSON TOWN**

nil

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

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TWENTY-SECOND AUGUST, 2013**

Signed by Registrar

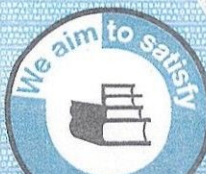
Name if added after Registration of Birth

26. Name: **TAJAE JAMAR OLIVER *****

27. Authority: **CERTIFICATE OF NAMING**

28. Date Added: **SIXTEENTH SEPTEMBER, 2013**

Last line of Vital Data



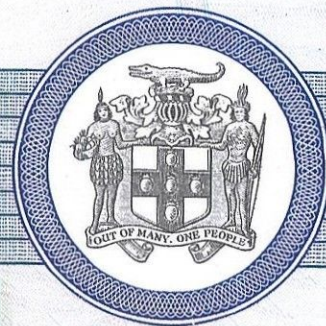
Registrar General's Department

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

Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

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



GIESECKE & DEVRIENT GMBH 2000

A 7783565

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE