010205912440/2020

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

Issue Date:
31st August, 2020

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **ST. ANN'S BAY** 2. PARISH: **ST. ANN**

3. NO. **GA 6557** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL ST ANN'S BAY**

5. Date of Birth: **SIXTH APRIL, 2009** 6. Sex: **FEMALE**

7. Name of Child: **KIMOYA KIMEISHA** ***

8. Physician or registered midwife in attendance: **NURSE OCCONNOR-WRAY**

FATHER

9. Name and Surname: **JOHN LAWRENCE** ***

10. Age at time of birth: **32 YEARS** 11. Occupation: **MASON**

12. Birthplace: **ST ANN**

MOTHER

13. (a) Residence: **LIME TREE GARDEN**

(b) Town/Village: **nil** (c) Parish: **ST. ANN**

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

15. Name and Surname: **KIMBERLY PATRICIA LAWRENCE** ***

Maiden Name: **JARRETT** ***

16. Age at time of birth: **24 YEARS**

17. Occupation: **FLAGWOMAN** 18. Birthplace: **ST ANN**

INFORMANT(S)

19. Name and Surname: **KIMBERLY PATRICIA LAWRENCE** *** **nil**

20. Qualification: **MOTHER** **nil**

21. (a) Residence: **LIME TREE GARDEN** **nil**

(b) Town/Village: **nil** **nil**

(c) Parish: **ST. ANN** **UNKNOWN**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **SIXTH APRIL, 2009** **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

Charlton D. J. McFarlane

Registrar General &
Deputy Keeper of the Records

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

OUT OF MANY, ONE PEOPLE

We aim to satisfy

Registrar General's Department

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

A 9423996

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE