

Issue Date:
28th January, 2021

JAMAICA

Registrar General's Department

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **ANNOTTO BAY** 2. PARISH: **ST. MARY**
3. NO. **FA 3461** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL ANNOTTO BAY**
5. Date of Birth: **SIXTEENTH FEBRUARY, 2012** 6. Sex: **MALE**
7. Name of Child: **SHELDON TAJEEB *****

8. Physician or registered midwife in attendance: **DR R SMITH**

FATHER

9. Name and Surname: **SHELDON OMAR THOMAS *****

10. Age at time of birth: **33 YEARS**

11. Occupation: **SALES REPRESENTATIVE**

12. Birthplace: **ST THOMAS**

MOTHER

13. (a) Residence: **BOTTOM ALBANY**

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

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

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

(b) Still-born: **1**

15. Name and Surname: **LEANORA YESENIA THOMAS *****

Maiden Name: **McLEAN *****

16. Age at time of birth: **33 YEARS**

17. Occupation: **PRACTICAL NURSE**

18. Birthplace: **ST JAMES**

INFORMANT(S)

19. Name and Surname: **LEANORA YESENIA THOMAS *****

nil

20. Qualification: **MOTHER**

nil

21. (a) Residence: **BOTTOM ALBANY**

nil

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

nil

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

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **SEVENTEENTH FEBRUARY, 2012**

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



Registrar General's Department

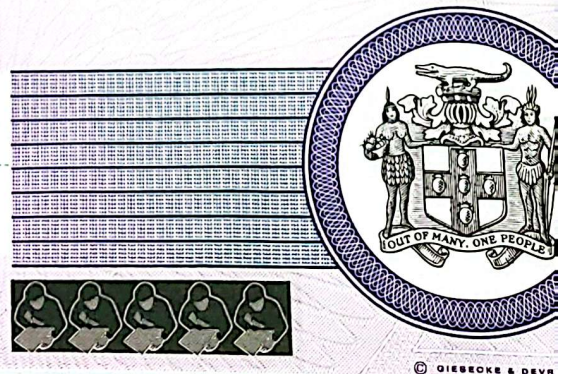
THIS CERTIFICATE NOT VALID UNLESS
PREPARED ON ENGRAVED BORDER
DISPLAYING EMBOSSED SEALS AND
SIGNATURE OF REGISTRAR GENERAL

Charlton D. J. McFarlane

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



A 9535758

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE