

JAMAICA

Registrar General's
DepartmentIssue Date:
9th August, 2013

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **UNIVERSITY OF THE WEST INDIES** 2. PARISH: **ST. ANDREW**
3. NO. **BY 9885** 4. Place of Birth: **UNIVERSITY HOSPITAL OF THE WEST INDIES**
5. Date of Birth: **SIXTEENTH JUNE, 2012** 6. Sex: **FEMALE**
7. Name of Child: **ZAIYAN LOUISE McGLASHEN *****

8. Physician or registered midwife in attendance: **STAFF MIDWIFE T L SMALL**

FATHER

9. Name and Surname: **HUGH LAWSON VOLROY MILLER *****10. Age at time of birth: **27 YEARS**11. Occupation: **RESEARCH OFFICER**12. Birthplace: **KINGSTON**

MOTHER

13. (a) Residence: **29 AUGUST TOWN ROAD**(b) Town/Village: **KINGSTON 7**(c) Parish: **ST. ANDREW**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **GEORGETTE STACY-ANN McGLASHEN *****Maiden Name: **nil**16. Age at time of birth: **32 YEARS**17. Occupation: **BUSINESSWOMAN**18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **GEORGETTE STACY-ANN McGLASHEN *******HUGH LAWSON VOLROY MILLER *****20. Qualification: **MOTHER****FATHER**21. (a) Residence: **29 AUGUST TOWN ROAD****43 BALDWIN CRESCENT**(b) Town/Village: **KINGSTON 7****KINGSTON 20**(c) Parish: **ST. ANDREW****ST. ANDREW**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **SEVENTEENTH JUNE, 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

Deirdre English GosseRegistrar General &
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

Registrar General's Department

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

A 6981577

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE