1020418850~~4/2013~~

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

Issue Date:
28th June, 2013

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM** 2. PARISH: **ST. JAMES**

3. NO. **NZ 4920** 4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**

5. Date of Birth: **FIRST FEBRUARY, 2013** 6. Sex: **FEMALE**

7. Name of Child: **ODYSSEA ARIANNA** ***

8. Physician or registered midwife in attendance: **NURSE S HEADLEY**

FATHER

9. Name and Surname: **FENTON NATANAIL FORRESTER** ***

10. Age at time of birth: **25 YEARS** 11. Occupation: **CARPENTER**

12. Birthplace: **ST JAMES**

MOTHER

13 (a) Residence: **CRAWFORD STREET**

(b) Town/Village: **MOUNT SALEM** (c) Parish: **ST. JAMES**

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

15. Name and Surname: **ORETIA NATESHA WILLIAMS** ***

Maiden Name: **nil** 16. Age at time of birth: **22 YEARS**

17. Occupation: **HOMEDUTIES** 18. Birthplace: **ST JAMES**

INFORMANT(S)

19. Name and Surname: **FENTON NATANAIL FORRESTER** *** **ORETIA NATESHA WILLIAMS** ***

20. Qualification: **FATHER** **MOTHER**

21. (a) Residence: **ROSE HEIGHTS** **CRAWFORD STREET**

(b)Town/Village: **MONTEGO BAY** **MOUNT SALEM**

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

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **SECOND FEBRUARY, 2013** **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

First Free Copy for children born as of January 1, 2007 and registered with a name at birth.

Initiative of GOJ - August 17, 2006

We aim to satisfy
...r General's Department

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

OUT OF MANY, ONE PEOPLE

© GIESECKE & DEVRIENT GMBH 2000

A 6925233

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Phone #1: 876-803-4447 Phone #2: _____

Occupation: _____

Work Address _____

Work Phone number(s): _____

evised 2023

INDEX # 51007

SEPT. 2025

FORRESTER, ODYSSEA ARIANNA