

10203807328/2012

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's
Department

Issue Date:
7th February, 2012

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **PORT MARIA** 2. PARISH: **ST. MARY**

3. NO. **FB 7482** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL PORT MARIA**

5. Date of Birth: **NINETEENTH OCTOBER, 2011** 6. Sex: **FEMALE**

7. Name of Child: **RUSHELL CARISSA SAYLES *****

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

9. Name and Surname: ********* FATHER

10. Age at time of birth: **nil** 11. Occupation: **nil**

12. Birthplace: **nil** MOTHER

13. (a) Residence: **BONNY GATE** (c) Parish: **ST. MARY**

(b) Town/Village: **nil** (b) Still-born: **nil**

14. No. of Children previously born to mother (a) Alive: **4**

15. Name and Surname: **NICOLA LATOYA STEPHENSON ***** 16. Age at time of birth: **35 YEARS**

Maiden Name: **DAYE *****

17. Occupation: **BUSINESSWOMAN** 18. Birthplace: **ST MARY**

INFORMANT(S)

19. Name and Surname: **NICOLA LATOYA STEPHENSON ***** **nil**

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

21. (a) Residence: **BONNY GATE** **nil**

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

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

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **NINETEENTH OCTOBER, 2011** Signed by Registrar

Name if added after Registration of Birth

26. Name: **nil** 28. Date Added: **NIL**

27. Authority: **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



for

Registrar General &
Deputy Keeper of the Records

Yvette Scott
Yvette Scott

