

Issue Date:
7th January, 2016

JAMAICA
Registrar General's
Department
BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **ST. ANN'S BAY** 2. PARISH: **ST. ANN**
3. NO. **GA 4698** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL ST ANN'S BAY**
5. Date of Birth: **FIFTH AUGUST, 2011** 6. Sex: **FEMALE**
7. Name of Child: **WAYNIQUE KHADEJAH *****
8. Physician or registered midwife in attendance: **NURSE I OMEALLY**
9. Name and Surname: **WAYNE ANDRE BROWN ***** FATHER
10. Age at time of birth: **23 YEARS** 11. Occupation: **BACK HOE OPERATOR.**
12. Birthplace: **ST MARY** 13. (a) Residence: **BAGNOLD SPRING** MOTHER
(b) Town/Village: **PEMBROKE HALL**
14. No. of Children previously born to mother (a) Alive: **nil** (c) Parish: **ST. MARY**
15. Name and Surname: **KADIAN KAMOYA PAIGE ***** (b) Still-born: **nil**
Maiden Name: **nil**
16. Age at time of birth: **21 YEARS**
17. Occupation: **HOMEDUTIES** 18. Birthplace: **ST ANN**
19. Name and Surname: **WAYNE ANDRE BROWN ***** INFORMANT(S) **KADIAN KAMOYA PAIGE *****
20. Qualification: **FATHER**
21. (a) Residence: **BAGNOLD SPRING** MOTHER
(b) Town/Village: **PEMBROKE HALL** **BAGNOLD SPRING**
(c) Parish: **ST. MARY** **PEMBROKE HALL**
ST. MARY
22. (a) Signed in my presence by said informant: **REGISTRAR'S CERTIFICATE**
23. Witness: **nil**
24. Date: **SIXTH AUGUST, 2011**
Signed by Registrar
25. Name: **nil** Name if added after Registration of Birth
26. Authority: **nil** 28. Date Added: **NIL**

Last line of Vital Data



Deirdre English Gosse
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



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ANY ALTERATION OR FRAUD