Issue Date:
3rd March, 2011

Department

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: MOUNT SALEM
2. PARISH: ST. JAMES
3. NO. NZ 5007
4. Place of Birth: CORNWALL REGIONAL HOSPITAL
5. Date of Birth: SECOND NOVEMBER, 2010
6. Sex: MALE
7. Name of Child: GYAN ANTHONY ***
8. Physician or registered midwife in attendance: NURSE S ALLEN

FATHER

9. Name and Surname: RICARDO LINDELL CAMPBELL ***
10. Age at time of birth: 21 YEARS
11. Occupation: CHEF
12. Birthplace: ST JAMES

MOTHER

13. (a) Residence: NEW RAMBLE
(b) Town/Village: GORDONS CROSSING
(c) Parish: ST. JAMES
14. No. of Children previously born to mother (a) Alive: nil
(b) Still-born: nil
15. Name and Surname: SHANICE TRACY-ANN DALEY ***
Maiden Name: nil
16. Age at time of birth:
17. Occupation: NIL
18. Birthplace: ST JAMES

INFORMANT(S)

19. Name and Surname:	RICARDO LINDELL CAMPBELL ***	SHANICE TRACY-ANN DALEY ***
20. Qualification:	FATHER	MOTHER
21. (a) Residence:	CRAWFORD STREET	NEW RAMBLE
(b)Town/Village:	MOUNT SALEM	GORDONS CROSSING
(c) Parish:	ST. JAMES	ST. JAMES

REGISTRAR'S CERTIFICATE

22. (a) Signed in my presence by said informant:
23. Witness: nil
24. Date: THIRD NOVEMBER, 2010
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
as of January 1, 2007
with a name at birth.
Initiative of GOJ - August

We aim to satisfy

Patricia P. Holness
Registrar General &
Deputy Keeper of the Records