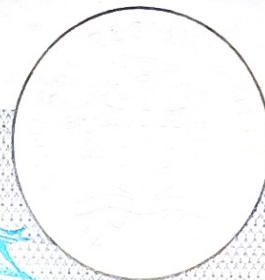




JAMAICA

Registrar General's  
Department

Issue Date:

14th May, 2015

## BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MANDEVILLE** 2. PARISH: **MANCHESTER**

3. NO. **IA 601** 4. Place of Birth: **MANDEVILLE REGIONAL HOSPITAL**

5. Date of Birth: **SEVENTH MARCH, 2012** 6. Sex: **FEMALE**

7. Name of Child: **TAHNIDA KAYONA GORDON \*\*\***

8. Physician or registered midwife in attendance: **NURSE E HALL**

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

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

12. Birthplace: **nil**

13. (a) Residence: **PROVIDENCE** MOTHER

(b) Town/Village: **CHRISTIANA** (c) Parish: **MANCHESTER**

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

15. Name and Surname: **PATRICE OLIVIA SPENCER \*\*\***

Maiden Name: **nil** 16. Age at time of birth: **18 YEARS**

17. Occupation: **HOMEDUTIES** 18. Birthplace: **KINGSTON**

19. Name and Surname: **PATRICE OLIVIA SPENCER \*\*\*** INFORMANT(S) **nil**

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

21. (a) Residence: **PROVIDENCE** **nil**

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

(c) Parish: **MANCHESTER** **nil**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **EIGHTH MARCH, 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



Registrar General's Department

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

Deirdre English Gosse

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

© GIESBRECK &amp; DEVIENH OMBH 2000

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE