



Registrar General's Department

Issue Date:**23rd January, 2025**

BIRTH REGISTRATION FORM

1. Birth in the district of: **KINGSTON** 2. Parish: **KINGSTON**
3. No. **AA 9673** 4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**
5. Date of Birth: **TWENTY-SIXTH SEPTEMBER, 2012** 6. Sex: **FEMALE**
7. Name of Child: **CASSIDY BREON MELISSA *****
8. Physician or registered midwife in attendance: **NURSE V LEWIS**
9. Name and Surname: **BYRON PETE LEWIS ***** FATHER
10. Age at time of birth: **37 YEARS** 11. Occupation: **POLICE OFFICER**
12. Birthplace: **ST THOMAS** MOTHER
13. (a) Residence: **23 ST THOMAS BOULEVARD SEVEN MILES**
(b) Town/Village: **BULL BAY** (c) Parish: **ST. ANDREW**
14. No. of Children previously born to mother (a) Alive: **nil** (b) Still-born: **nil**
15. Name and Surname: **CLAUDINE ALICIA JAMES ***** 16. Age at time of birth: **19 YEARS**
Maiden Name: **nil**
17. Occupation: **HOME DUTIES** 18. Birthplace: **KINGSTON**
19. Name and Surname: **CLAUDINE ALICIA JAMES ***** INFORMANT(S) **BYRON PETE LEWIS *****
20. Qualification: **MOTHER** **FATHER**
21. (a) Residence: **23 ST THOMAS BOULEVARD SEVEN MILES** **SOMERSET**
(b) Town/Village: **BULL BAY** **HIGHLAND HEAD**
(c) Parish: **ST. ANDREW** **ST. THOMAS**
22. (a) Signed in my presence by said informant: _____ REGISTRAR'S CERTIFICATE
23. Witness: **nil**
24. Date: **TWENTY-SIXTH SEPTEMBER, 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***Desmond Davis (Act.)****Registrar General &
Deputy Keeper of the Records****THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL**