

JAMAICA

Registrar General's
Department

Issue Date:

15th March, 2012

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **HALF WAY TREE**2. PARISH: **ST. ANDREW**3. NO. **BA 4937**4. Place of Birth: **ANDREWS MEMORIAL HOSPITAL**5. Date of Birth: **SIXTEENTH FEBRUARY, 2012**6. Sex: **MALE**7. Name of Child: **ZACHARY NICHOLAS *****8. Physician or registered midwife in attendance: **DR S WYNTER**

FATHER

9. Name and Surname: **WARREN CHIN *****10. Age at time of birth: **36 YEARS**11. Occupation: **MEDICAL DOCTOR**12. Birthplace: **ST ANDREW**

MOTHER

13. (a) Residence: **2 CARMELLO DRIVE VIEW PORT VILLA**(b) Town/Village: **KINGSTON 8**(c) Parish: **ST. ANDREW**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **SHERAY NICOLE CHIN *****Maiden Name: **WARD *****16. Age at time of birth: **35 YEARS**17. Occupation: **MEDICAL DOCTOR**18. Birthplace: **ST ANDREW**

INFORMANT(S)

19. Name and Surname: **SHERAY NICOLE CHIN *******nil**20. Qualification: **MOTHER****nil**21. (a) Residence: **2 CARMELLO DRIVE VIEW PORT VILLA****nil**(b) Town/Village: **KINGSTON 8****nil**(c) Parish: **ST. ANDREW**

REGISTRAR'S CERTIFICATE

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

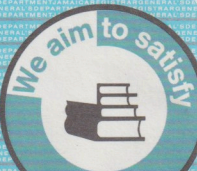
23. Witness: **nil**24. Date: **SEVENTEENTH FEBRUARY, 2012**

Signed by Registrar

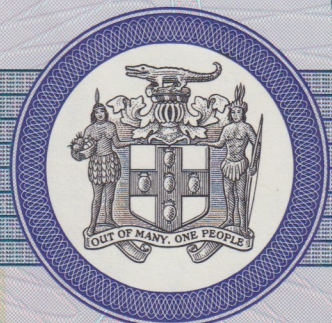
Name if added after Registration of Birth

26. Name: **nil**27. Authority: **nil**28. Date Added: **NIL**

Last line of Vital Data



for

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

Registrar General's Department

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

A 6266891

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE