

ie Date:
h November, 2009

JAMAICA
*Registrar General's
Department*
BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM**

2. PARISH: **ST. JAMES**

3. NO. **NZ 9295**

4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**

6. Sex: **MALE**

5. Date of Birth: **THIRTY-FIRST JULY, 2009**

7. Name of Child: **DAMARI JEVANNE *****

8. Physician or registered midwife in attendance: **NURSE M MCINTOSH**

FATHER

9. Name and Surname: **RYAN CHRISTOPHER GUTZMORE *****

10. Age at time of birth: **25 YEARS**

11. Occupation: **SECURITY GUARD**

12. Birthplace: **ST MARY**

MOTHER

13. (a) Residence: **NEW MILNS**

(b) Town/Village: **KEN JONES**

(c) Parish: **HANOVER**

14. No. of Children previously born to mother (a) Alive: **2**

(b) Still-born: **nil**

15. Name and Surname: **VALERIE ALTHIA GRAY *****

Maiden Name: **nil**

16. Age at time of birth: **29 YEARS**

17. Occupation: **SECRETARY**

18. Birthplace: **ST ELIZABETH**

INFORMANT(S)

19. Name and Surname: **RYAN CHRISTOPHER GUTZMORE *****

VALERIE ALTHIA GRAY ***

20. Qualification: **FATHER**

MOTHER

21. (a) Residence: **LOT 188 NORWOOD GARDENS**

NEW MILNS

(b) Town/Village: **MONTEGO BAY**

KEN JONES

(c) Parish: **ST. JAMES**

HANOVER

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **THIRTY-FIRST JULY, 2009**

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 children born
as of January 1, 2007 and registered
with a name at birth.

Initiative of GOJ - August 17, 2006

Patricia P. Holness

