

JAMAICA

Registrar General's  
DepartmentIssue Date:  
11th October, 2018

## BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **ANNOTTO BAY** 2. PARISH: **ST. MARY**  
3. NO. **FA 5371** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL ANNOTTO BAY**  
5. Date of Birth: **TWENTY-FIRST DECEMBER, 2013** 6. Sex: **MALE**  
7. Name of Child: **COYDELLE JYMAR GERRICK CAMPBELL \*\*\***

8. Physician or registered midwife in attendance: **NURSE K DAWSON-GRAHAM**

FATHER

9. Name and Surname: **HIXTROY CAMPBELL \*\*\***10. Age at time of birth: **26 YEARS**11. Occupation: **NIL**12. Birthplace: **WESTMORELAND**

MOTHER

13. (a) Residence: **HOPEWELL**(b) Town/Village: **HIGHGATE**(c) Parish: **ST. MARY**14. No. of Children previously born to mother (a) Alive: **2**(b) Still-born: **nil**15. Name and Surname: **DANIELLE TONNI-ANN PERKINS \*\*\***Maiden Name: **nil**16. Age at time of birth: **23 YEARS**17. Occupation: **HOME DUTIES**18. Birthplace: **ST MARY**

INFORMANT(S)

19. Name and Surname: **DANIELLE TONNI-ANN PERKINS \*\*\*****nil**20. Qualification: **MOTHER****nil**21. (a) Residence: **HOPEWELL****nil**(b) Town/Village: **HIGHGATE****nil**(c) Parish: **ST. MARY**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **TWENTY-FIRST DECEMBER, 2013**

Signed by Registrar

Name if added after Registration of Birth

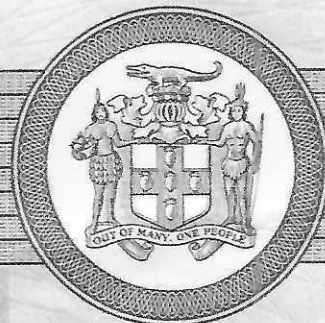
26. Name: **nil**27. Authority: **nil**28. Date Added: **NIL**

Last line of Vital Data



Registrar General's Department

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

GIESSECKE &amp; DEVARANT GMBH 2000

A 8856243

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE