

Issue Date:
21st May, 2010

Registrar General's
Department
BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **BLACK RIVER** 2. PARISH: **ST. ELIZABETH**
3. NO. **KA 8156** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL BLACK RIVER**
5. Date of Birth: **TWENTY-SECOND DECEMBER, 2009** 6. Sex: **FEMALE**
7. Name of Child: **SASHA-GAYE ITSY DIXON *****

8. Physician or registered midwife in attendance: **NURSE N ROBERTS**

FATHER

9. Name and Surname: *********

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

11. Occupation: **nil**

12. Birthplace: **nil**

MOTHER

13. (a) Residence: **ROUND HILL**

(b) Town/Village: **MOUNTAINSIDE**

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

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

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

15. Name and Surname: **DENISHA TAYLOR *****

Maiden Name: **nil**

16. Age at time of birth: **23 YEARS**

17. Occupation: **DOMESTIC**

18. Birthplace: **ST ELIZABETH**

INFORMANT(S)

19. Name and Surname: **DENISHA TAYLOR *****

nil

20. Qualification: **MOTHER**

nil

21. (a) Residence: **ROUND HILL**

nil

(b) Town/Village: **MOUNTAINSIDE**

nil

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

UNKNOWN

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TWENTY-THIRD DECEMBER, 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



Registrar General's Department

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

Registrar General &
Deputy Keeper of the Records

THIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

A 5521252

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

