



JAMAICA

Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:

18th December, 2013

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM** 2. PARISH: **ST. JAMES**
 3. NO. **NZ 7010** 4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**
 5. Date of Birth: **FOURTEENTH AUGUST, 2013** 6. Sex: **FEMALE**
 7. Name of Child: **ANANDRA JANOVA *****

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

FATHER

9. Name and Surname: **NAMAR AKIN TUMMINGS *****10. Age at time of birth: **23 YEARS**11. Occupation: **TOUR GUIDE**12. Birthplace: **ST JAMES**

MOTHER

13. (a) Residence: **EDEN**(b) Town/Village: **COPSE**(c) Parish: **HANOVER**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **SAMANTHA ANGELA MORGAN *****Maiden Name: **nil**16. Age at time of birth: **20 YEARS**17. Occupation: **HOMEDUTIES**18. Birthplace: **ST JAMES**

INFORMANT(S)

19. Name and Surname: **NAMAR AKIN TUMMINGS *******SAMANTHA ANGELA MORGAN *****20. Qualification: **FATHER****MOTHER**21. (a) Residence: **EDEN****EDEN**(b) Town/Village: **COPSE****COPSE**(c) Parish: **HANOVER****HANOVER**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **FIFTEENTH AUGUST, 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

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

Deirdre English Gosse
 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 7150208

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



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