

Registrar General's Department BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MANDEVILLE**

2. PARISH: **MANCHESTER**

3. NO. **IA 3201**

4. Place of Birth: **PUBLIC GENERAL HOSPITAL MANDEVILLE**

6. Sex: **MALE**

5. Date of Birth: **FOURTH FEBRUARY, 2008**

7. Name of Child: **EARL ANDRADIE *****

8. Physician or registered midwife in attendance: **NURSE S KERR TURNER**

9. Name and Surname: **EARL ROLLINGTON WEST *****

FATHER

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

11. Occupation: **WAITER**

12. Birthplace: **MANCHESTER**

MOTHER

13. (a) Residence: **MAY DAY**

(c) Parish: **MANCHESTER**

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

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

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

15. Name and Surname: **LISA-GAY LORRAINE LEWIS *****

16. Age at time of birth: **21 YEARS**

Maiden Name: **nil**

18. Birthplace: **MANCHESTER**

17. Occupation: **UNIVERSITY STUDENT**

INFORMANT(S)

LISA-GAY LORRAINE LEWIS ***

19. Name and Surname: **EARL ROLLINGTON WEST *****

MOTHER

20. Qualification: **FATHER**

MAY DAY

21. (a) Residence: **MEADSFIELD**

nil

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

MANCHESTER

(c) Parish: **MANCHESTER**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

Signed by Registrar

24. Date: **FOURTH FEBRUARY, 2008**

Name if added after Registration of Birth

26. Name: **nil**

28. Date Added: **NIL**

27. Authority: **nil**

I certify this to be a true copy of document shown to me as the original.
Mona Smith
14.9.2020

Marcia Williams Smith J.P.
Manchester #00266

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
Patricia P. Holness

Registrar General &
Deputy Keeper of the Records

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



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VOIDS THIS CERTIFICATE