

Issue Date:  
14th November, 2012

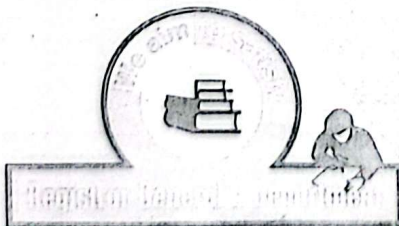
*Registrar General's  
Department*  
**BIRTH REGISTRATION FORM**

|                                                                                              |                                                                |                            |
|----------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------|
| 1. BIRTH IN THE DISTRICT OF: <b>PORT ANTONIO</b>                                             |                                                                | 2. PARISH: <b>PORTLAND</b> |
| 3. NO. <b>DA 438</b>                                                                         | 4. Place of Birth: <b>PUBLIC GENERAL HOSPITAL PORT ANTONIO</b> |                            |
| 5. Date of Birth: <b>SEVENTH AUGUST, 2012</b>                                                | 6. Sex: <b>FEMALE</b>                                          |                            |
| 7. Name of Child: <b>TERESA ASHANTI ***</b>                                                  |                                                                |                            |
| 8. Physician or registered midwife in attendance: <b>NURSE A LINDO</b>                       |                                                                |                            |
| FATHER                                                                                       |                                                                |                            |
| 9. Name and Surname: <b>LIAM ANTHONY PARKES ***</b>                                          |                                                                |                            |
| 10. Age at time of birth: <b>22 YEARS</b>                                                    | 11. Occupation: <b>MASON</b>                                   |                            |
| 12. Birthplace: <b>PORTLAND</b>                                                              |                                                                |                            |
| MOTHER                                                                                       |                                                                |                            |
| 13. (a) Residence: <b>ZION HILL</b>                                                          |                                                                |                            |
| (b) Town/Village: <b>FAIRY HILL</b>                                                          |                                                                |                            |
| (c) Parish: <b>PORTLAND</b>                                                                  |                                                                |                            |
| 14. No. of Children previously born to mother (a) Alive: <b>1</b> (b) Still-born: <b>nil</b> |                                                                |                            |
| 15. Name and Surname: <b>TAMICKA STACIA LAWRENCE ***</b>                                     |                                                                |                            |
| Maiden Name: <b>nil</b>                                                                      |                                                                |                            |
| 16. Age at time of birth: <b>21 YEARS</b>                                                    |                                                                |                            |
| 17. Occupation: <b>COSMETOLOGIST</b>                                                         |                                                                |                            |
| 18. Birthplace: <b>ST ANN</b>                                                                |                                                                |                            |
| INFORMANT(S)                                                                                 |                                                                |                            |
| 19. Name and Surname: <b>LIAM ANTHONY PARKES ***</b> <b>TAMICKA STACIA LAWRENCE ***</b>      |                                                                |                            |
| 20. Qualification: <b>FATHER</b> <b>MOTHER</b>                                               |                                                                |                            |
| 21. (a) Residence: <b>ZION HILL</b> <b>ZION HILL</b>                                         |                                                                |                            |
| (b) Town/Village: <b>FAIRY HILL</b> <b>FAIRY HILL</b>                                        |                                                                |                            |
| (c) Parish: <b>PORTLAND</b> <b>PORTLAND</b>                                                  |                                                                |                            |
| REGISTRAR'S CERTIFICATE                                                                      |                                                                |                            |
| 22. (a) Signed in my presence by said informant:                                             |                                                                |                            |
| 23. Witness: <b>nil</b>                                                                      |                                                                |                            |
| 24. Date: <b>EIGHTH AUGUST, 2012</b> Signed by Registrar                                     |                                                                |                            |
| Name if added after Registration of Birth                                                    |                                                                |                            |
| 26. Name: <b>nil</b>                                                                         |                                                                |                            |
| 27. Authority: <b>nil</b>                                                                    |                                                                |                            |
| 28. Date Added: <b>NIL</b>                                                                   |                                                                |                            |

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

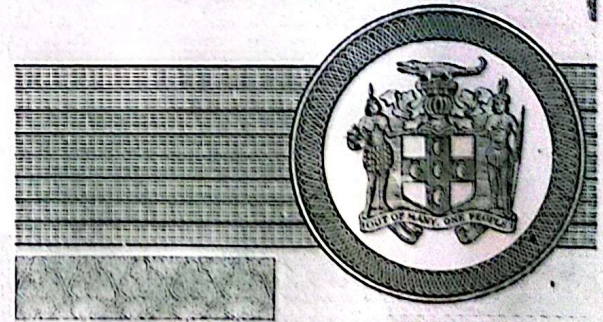


*Deirdre English Gosse*  
Deirdre English Gosse

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 6611172



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE