

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:

12th April, 2016

1. BIRTH IN THE DISTRICT OF: **KINGSTON**2. PARISH: **KINGSTON**3. NO. **AA 326**4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**5. Date of Birth: **SIXTEENTH OCTOBER, 2012**6. Sex: **FEMALE**7. Name of Child: **ABENA TENISHA CLARK *****8. Physician or registered midwife in attendance: **NURSE K FOSTER**9. Name and Surname: *********

FATHER

10. Age at time of birth: **nil**11. Occupation: **nil**12. Birthplace: **nil**

MOTHER

13. (a) Residence: **9 OAKLAND DRIVE**(b) Town/Village: **KINGSTON 11**(c) Parish: **ST. ANDREW**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **ABENA GIFFORD *****Maiden Name: **nil**16. Age at time of birth: **16 YEARS**17. Occupation: **HOMEDUTIES**18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **ABENA GIFFORD *******nil**20. Qualification: **MOTHER****nil**21. (a) Residence: **9 OAKLAND DRIVE****nil**(b) Town/Village: **KINGSTON 11****nil**(c) Parish: **ST. ANDREW**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **SIXTEENTH OCTOBER, 2012**

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



Deirdre English Gosse
Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

