1020367155/2010 CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's Department

BIRTH REGISTRATION FORM

Issue Date:
28th May, 2010

1. BIRTH IN THE DISTRICT OF: **BLACK RIVER** 2. PARISH: **ST. ELIZABETH**

3. NO. **KA 7957** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL BLACK RIVER**

5. Date of Birth: **NINTH NOVEMBER, 2009** 6. Sex: **FEMALE**

7. Name of Child: **OMEILIA ONEIKA HINDS *****

8. Physician or registered midwife in attendance: **NURSE K BLAKE**

FATHER

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

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

12. Birthplace: **nil**

MOTHER

13. (a) Residence: **PEPPER**

(b) Town/Village: **nil** (c) Parish: **ST. ELIZABETH**

14. No. of Children previously born to mother (a) Alive: **3** (b) Still-born: **nil**

15. Name and Surname: **NATALIE JONES *****

Maiden Name: **nil** 16. Age at time of birth: **31 YEARS**

17. Occupation: **HOMEDUTIES** 18. Birthplace: **MANCHESTER**

INFORMANT(S)

19. Name and Surname: **NATALIE JONES *****

20. Qualification: **MOTHER**

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

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

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

nil

nil

nil

nil

UNKNOWN

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TENTH NOVEMBER, 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

We aim to satisfy

Registrar General's Department

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

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

OUT OF MANY, ONE PEOPLE

A 5527208

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE