

10203900222/2012

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:
29th May, 2012

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM** 2. PARISH: **ST. JAMES**
 3. NO **NZ 797** 4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**
 5. Date of Birth: **TWENTY-THIRD FEBRUARY, 2012** 6. Sex: **MALE**
 7. Name of Child: **EVERTON GARFIELD *****

8. Physician or registered midwife in attendance: **NURSE L BALL**
 9. Name and Surname: **EVERTON GARFIELD FEARON ***** FATHER

10. Age at time of birth: **46 YEARS** 11. Occupation: **MASON**

12. Birthplace: **ST JAMES** MOTHER

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

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

(b) Town/Village: **MONTEGO BAY**

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

14. No. of Children previously born to mother (a) Alive: **4**

15. Name and Surname: **CLAUDETTE ADINA DRUMMOND *****

16. Age at time of birth: **40 YEARS**

Maiden Name: **nil**

18. Birthplace: **ST JAMES**

17. Occupation: **OFFICE ATTENDANT**

INFORMANT(S)

19. Name and Surname: **EVERTON GARFIELD FEARON *****

CLAUDETTE ADINA DRUMMOND ***

20. Qualification: **FATHER**

MOTHER

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

HENDON

(b) Town/Village: **MONTEGO BAY**

MONTEGO BAY

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

ST. JAMES

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **TWENTY-THIRD FEBRUARY, 2012**

Signed by Registrar

Name if added after Registration of Birth

25. Name: **nil**

28. Date Added: **NIL**

27. Authority: **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



For

Registrar General &
Deputy Keeper of the Records

Yvette Scott
Yvette Scott

