

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:

16th August, 2013

1. BIRTH IN THE DISTRICT OF: **BLACK RIVER**2. PARISH: **ST. ELIZABETH**3. NO. **KA 9237**4. Place of Birth: **PUBLIC GENERAL HOSPITAL BLACK RIVER**5. Date of Birth: **EIGHTEENTH OCTOBER, 2010**6. Sex: **MALE**7. Name of Child: **KERRONO KEANO *****8. Physician or registered midwife in attendance: **NURSE J EBANKS**

FATHER

9. Name and Surname: **KERRON ROHAN FOSTER *****10. Age at time of birth: **27 YEARS**11. Occupation: **FARMER**12. Birthplace: **ST ELIZABETH**

MOTHER

13. (a) Residence: **VINEYARD**(b) Town/Village: **BLACK RIVER**(c) Parish: **ST. ELIZABETH**14. No. of Children previously born to mother (a) Alive: **1**(b) Still-born: **nil**15. Name and Surname: **AVADAWN ROCHEYNE NEMBARD *****Maiden Name: **nil**16. Age at time of birth: **21 YEARS**17. Occupation: **HOMEDUTIES**18. Birthplace: **TRELAWNY**

INFORMANT(S)

19. Name and Surname: **AVADAWN ROCHEYNE NEMBARD *******KERRON ROHAN FOSTER *****20. Qualification: **MOTHER****FATHER**21. (a) Residence: **VINEYARD****VINEYARD**(b) Town/Village: **BLACK RIVER****BLACK RIVER**(c) Parish: **ST. ELIZABETH****ST. ELIZABETH**

REGISTRAR'S CERTIFICATE

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

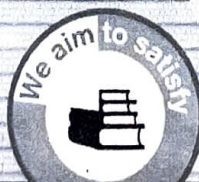
23. Witness: **nil**24. Date: **EIGHTEENTH OCTOBER, 2010**

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



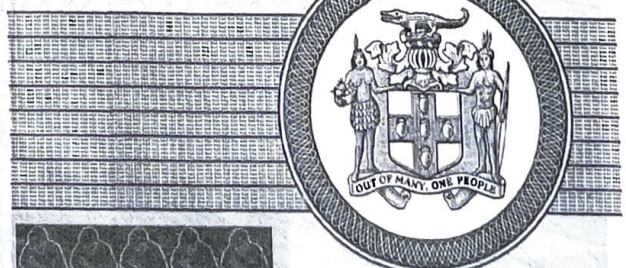
Registrar General's Department

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

Deirdre English Gosse

Registrar General &
Deputy Keeper of the RecordsTHIS IS A CERTIFICATE
OF THE RECORD OFFICIALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT OF JAMAICA

A 7000135



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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE