

*Registrar General's
Department*
BIRTH REGISTRATION FORM

2012

1. BIRTH IN THE DISTRICT OF: **MOUNT SALEM**
2. PA
3. NO. **NZ 9282**
4. Place of Birth: **CORNWALL REGIONAL HOSPITAL**
5. Date of Birth: **TWENTY-SIXTH OCTOBER, 2011**
6. Sex: **FE**
7. Name of Child: **AMONA ANTONIAE *****

8. Physician or registered midwife in attendance: **NURSE C DOWMAN**

9. Name and Surname: **MARVIN ANTHONY MORRIS *****

FATHER

10. Age at time of birth: **26 YEARS**

11. Occupation: **MASON**

Birthplace: **ST JAMES**

MOTHER

Residence: **SPOT VALLEY**

own/Village: **LITTLE RIVER**

(c) Parish: **ST.**

f Children previously born to mother (a) Alive: **1**

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

and Surname: **AMOY CRISAN KERR *****

Maiden Name: **nil**

16.

ion: **HOMEDUTIES**

18. Birthplace: **ST JAMES**

INFORMANT(S)

d Surname: **MARVIN ANTHONY MORRIS *****

AMOY CRISAN

ion: **FATHER**

MOTHER

ence: **ROSEVALE HOUSING SCHEME**

SPOT VALLEY

/illage: **LITTLE RIVER**

LITTLE RIVER

ST. JAMES

ST. JAMES

REGISTRAR'S CERTIFICATE

d in my presence by said informant:

s: **nil**

TWENTY-SEVENTH OCTOBER, 2011

Signed by Registrar

ie: **nil**

Name if added after Registration of Birth

thority: **nil**

28. Date Added: **Nil**

Last line of Vital Data

First Free C
as of January
with a name a
Initiative of G