

080202551398/2013

CERTIFICATION OF VITAL RECORD

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:
6th March, 2013

1. BIRTH IN THE DISTRICT OF: **KINGSTON**
2. PARISH: **KINGSTON**
3. NO. **AA 4076**
4. Place of Birth: **VICTORIA JUBILEE HOSPITAL**
5. Date of Birth: **SEVENTH SEPTEMBER, 2007**
6. Sex: **MALE**
7. Name of Child: **DAEQUAN DEMARCO *****

8. Physician or registered midwife in attendance: **NURSE N DALHOUSE**
FATHER

9. Name and Surname: **ADRIAN ROLLAN MONTIQUE *****

10. Age at time of birth: **17 YEARS**
11. Occupation: **NIL**

12. Birthplace: **KINGSTON**
MOTHER

13. (a) Residence: **78 3/4 NORTH STREET**
(b) Town/Village: **KINGSTON 14**
(c) Parish: **KINGSTON**

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

15. Name and Surname: **CRYSTAL STACEY-ANN REID *****
16. Age at time of birth: **17 YEARS**
Maiden Name: **nil**

17. Occupation: **HOMEDUTIES**
18. Birthplace: **KINGSTON**
INFORMANT(S)

19. Name and Surname: **CRYSTAL STACEY-ANN REID *****
ADRIAN ROLLAN MONTIQUE ***

20. Qualification: **MOTHER**
FATHER
21. (a) Residence: **78 3/4 NORTH STREET**
LOT 20 BLOCK 1 GREENWICH STREET
(b) Town/Village: **KINGSTON 14**
KINGSTON 14
(c) Parish: **KINGSTON**
KINGSTON

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **SEVENTH SEPTEMBER, 2007**

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

