

Issue Date:
9th May, 2016

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **NEWELL**

2. PARISH: **ST. ELIZABETH**

3. NO.: **KL 8007**

4. Place of Birth: **NEWELL MATERNITY CENTRE**

5. Date of Birth: **THIRTY-FIRST DECEMBER, 2013**

6. Sex: **FEMALE**

7. Name of Child: **BRIANNA NATASHA BROOKS *****

8. Physician or registered midwife in attendance: **NURSE C.M. FRASER-MILLER**

9. Name and Surname: **UTON ANTHONY BROOKS *****

FATHER

10. Age at time of birth: **25 YEARS**

11. Occupation:

FORKLIFT OPERATOR

12. Birthplace: **CLARENDON**

MOTHER

13. (a) Residence: **RIDGE PEN**

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

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

14. No. of Children previously born to mother (a) Alive: **2**

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

15. Name and Surname: **DACIA ANESHA ROWE *****

Maternal Name: **nil**

16. Age at time of birth: **25 YEARS**

17. Occupation: **SHOPKEEPER**

18. Birthplace: **ST. ELIZABETH**

INFORMANT(S)

19. Name and Surname: **DACIA ANESHA ROWE *****

nil

20. Qualification: **MOTHER**

nil

21. (a) Residence: **RIDGE PEN**

nil

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

nil

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

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **NINTH JANUARY, 2014**

Signed by Registrar

on the authority of the Registrar General

Name if added after Registration of Birth:

26. Name: **nil**

27. Authority: **nil**

28. Date added: **Nil**

1. LINES 9-12 ADDED on Fifteenth April, 2016

***** AMENDMENTS *****

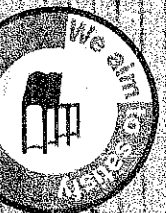
Last time of Vital Data

BURNT SAVANNAH PRIMARY SCHOOL
Burnt Savannah P.A.

8 Elizabeth

TEL: 876-781-6167

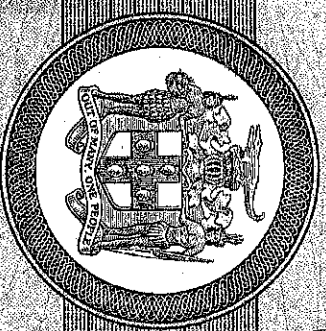
Deirdre English Gosse



Registrar General's Department

Registrar General &
Deputy Keeper of the Records

THIS IS A CERTIFICATE
OF THE RECORD OFFICALLY REGISTERED IN THE
REGISTRAR GENERAL'S DEPARTMENT, JAMAICA



A 8033648

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE