



Registrar General's Department

Issue Date:**21st June, 2023****BIRTH REGISTRATION FORM**1. Birth in the district of: **SAVANNA-LA-MAR**2. Parish: **WESTMORELAND**3. No. **LA 1491**4. Place of Birth: **PUBLIC GENERAL HOSPITAL SAVANNA-LA-MAR**5. Date of Birth: **TWENTY-FOURTH MAY, 2012**6. Sex: **MALE**7. Name of Child: **SHACORE MICHAEL McGHIE *****8. Physician or registered midwife in attendance: **NURSE C SMART**9. Name and Surname: ***********FATHER**10. Age at time of birth: **nil**11. Occupation: **nil**12. Birthplace: **nil****MOTHER**13. (a) Residence: **38 SEATON CRESCENT**(b) Town/Village: **SAVANNA-LA-MAR**(c) Parish: **WESTMORELAND**

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

nil(b) Still-born: **nil**15. Name and Surname: **ONIEKA CUNNINGHAM *****Maiden Name: **nil**16. Age at time of birth: **18 YEARS**17. Occupation: **HOME DUTIES**18. Birthplace: **WESTMORELAND****INFORMANT(S)**19. Name and Surname: **ONIEKA CUNNINGHAM *******nil**20. Qualification: **MOTHER****nil**21. (a) Residence: **38 SEATON CRESCENT****nil**(b) Town/Village: **SAVANNA-LA-MAR****nil**(c) Parish: **WESTMORELAND****REGISTRAR'S CERTIFICATE**

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

23. Witness: **nil**24. Date: **TWENTY-FIFTH MAY, 2012****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**Charlton D. J. McFarlane*

Charlton D. J. McFarlane

Registrar General &
Deputy Keeper of the RecordsTHIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL

C 0103249

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE