

JAMAICA

Registrar General's
Department

BIRTH REGISTRATION FORM

Issue Date:
9th June, 2021

1. BIRTH IN THE DISTRICT OF: **SPALDINGS** 2. PARISH: **MANCHESTER**
3. NO. **IAH 4893** 4. Place of Birth: **PUBLIC GENERAL HOSPITAL SPALDINGS**
5. Date of Birth: **TWENTY-NINTH SEPTEMBER, 2008** 6. Sex: **MALE**
7. Name of Child: **JAHIEH DECARIE *****

8. Physician or registered midwife in attendance: **NURSE C ALLEN MILLWOOD**9. Name and Surname: **DENO DEMENGO LINDSAY ***** FATHER10. Age at time of birth: **21 YEARS** 11. Occupation: **TAXI DRIVER**12. Birthplace: **MANCHESTER**13. (a) Residence: **GLENWOOD SPRING** MOTHER(b) Town/Village: **SPALDINGS**(c) Parish: **CLARENDON**14. No. of Children previously born to mother (a) Alive: **1** (b) Still-born: **nil**15. Name and Surname: **SUZETTE ANN-MARIE HENRY *****Maiden Name: **nil**16. Age at time of birth: **25 YEARS**17. Occupation: **HOMEDUTIES**18. Birthplace: **CLARENDON**19. Name and Surname: **DENO DEMENGO LINDSAY ***** INFORMANT(S)**SUZETTE ANN-MARIE HENRY *****20. Qualification: **FATHER** MOTHER21. (a) Residence: **GLENWOOD SPRING** GLENWOOD SPRING(b) Town/Village: **SPALDINGS** SPALDINGS(c) Parish: **CLARENDON** CLARENDON

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **TWENTY-NINTH SEPTEMBER, 2008**

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

CLM

Charlton D. J. McFarlane

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

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE