

Registrar General's Department

Issue Date:
10th June, 2016

BIRTH REGISTRATION FORM

1. BIRTH IN THE DISTRICT OF: **MANDEVILLE**
 2. PARISH: **MANCHESTER**
 3. NO. IA: **1931**
 4. Place of Birth: **PUBLIC GENERAL HOSPITAL MANDEVILLE**
 5. Date of Birth: **SECOND NOVEMBER, 2007**
 6. Sex: **FEMALE**
 7. Name of Child: **GAYLON OMELIA *****

8. Physician or registered midwife in attendance: **NURSE P MARTIN**

9. Name and Surname: **ORLANDO WHITE *****
 10. Age at time of birth: **27 YEARS**
 11. Occupation: **MASON**
 12. Birthplace: **MANCHESTER**

13. (a) Residence: **GREEN MOUNT**
 (b) Town/Village: **MILE GULLY**

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

15. Name and Surname: **SHERLETTE HAVALEEN HAMILTON *****
 Maiden Name: **nil**

17. Occupation: **HOMEDUTIES**

16. Age at time of birth: **25 YEARS**
 18. Birthplace: **MANCHESTER**

19. Name and Surname: **ORLANDO WHITE *****

INFORMANT(S)

SHERLETTE HAVALEEN HAMILTON ***

20. Qualification: **FATHER**

MOTHER

21. (a) Residence: **GREEN MOUNT**

GREEN MOUNT

(b) Town/Village: **MILE GULLY**

MILE GULLY

(c) Parish: **MANCHESTER**

MANCHESTER

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**

24. Date: **SECOND NOVEMBER, 2007**

Signed by Registrar

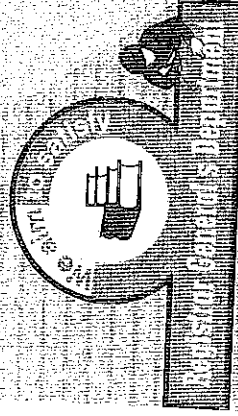
Name if added after Registration of Birth

26. Name: **nil**

27. Authority: **nil**

28. Date Added: **NIL**

Last line of Vital Data



Deirdre English Gosse

Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records

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

