

JAMAICA

Registrar General's  
Department

## BIRTH REGISTRATION FORM

Issue Date:  
6th May, 2013

1. BIRTH IN THE DISTRICT OF: **UNIVERSITY OF THE WEST INDIES** 2. PARISH: **ST. ANDREW**  
3. NO. **BY 1363** 4. Place of Birth: **UNIVERSITY HOSPITAL OF THE WEST INDIES**  
5. Date of Birth: **TWENTY-NINTH JANUARY, 2013** 6. Sex: **FEMALE**  
7. Name of Child: **see line 26**

8. Physician or registered midwife in attendance: **DRS S MITCHELL & S DALLING**

FATHER

9. Name and Surname: **SHELDON O'BRIEN BRYAN \*\*\***10. Age at time of birth: **31 YEARS**11. Occupation: **ARMY OFFICER**12. Birthplace: **WESTMORELAND**

MOTHER

13. (a) Residence: **17 ROEHAMPTON DRIVE APARTMENT 4**(b) Town/Village: **KINGSTON 19**(c) Parish: **ST. ANDREW**14. No. of Children previously born to mother (a) Alive: **nil**(b) Still-born: **nil**15. Name and Surname: **PATRICIA AMMONIA BRYAN \*\*\***Maiden Name: **HIGGINS \*\*\***16. Age at time of birth: **29 YEARS**17. Occupation: **LOAN OFFICER**18. Birthplace: **KINGSTON**

INFORMANT(S)

19. Name and Surname: **PATRICIA AMMONIA HIGGINS-BRYAN \*\*\*****nil**20. Qualification: **MOTHER****nil**21 (a) Residence: **17 ROEHAMPTON DRIVE APARTMENT 4****nil**(b) Town/Village: **KINGSTON 19****nil**(c) Parish: **ST. ANDREW**

REGISTRAR'S CERTIFICATE

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

23. Witness: **nil**24. Date: **THIRTIETH JANUARY, 2013**

Signed by Registrar

Name if added after Registration of Birth

26 Name: **KHLOE-RENEE VANECIA \*\*\***27. Authority: **CERTIFICATE OF NAMING**28. Date Added: **FIFTH FEBRUARY, 2013**

Last line of Vital Data



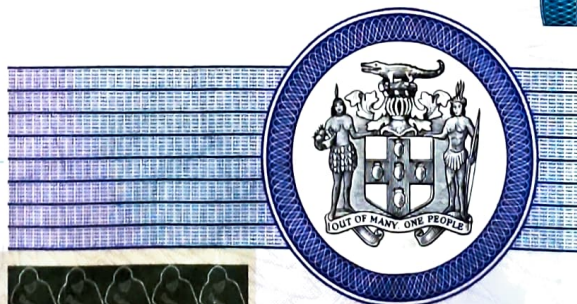
Registrar General's Department

THIS CERTIFICATE NOT VALID UNLESS  
PREPARED ON ENGRAVED BORDER  
DISPLAYING EMBOSSED SEALS AND  
SIGNATURE OF REGISTRAR GENERAL

Deirdre English Gosse

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