

## REPUBLIC OF TRINIDAD AND TOBAGO

## **CERTIFICATE OF BIRTH**

7760515134

Given Name(s): JOHANNA ALEXIS

Other Name(s): \*\*\*\*\*

Place of Birth: MEDICAL ASSOCIATES HOSPITAL LIMITED

CORNER ALBERT AND ABERCROMBY STREETS

Mother's Name: LESLEY-ANN LEANDRA JACKY

Mother's Former Surname: LA CROIX Mother's Prev. Surname(s): \*\*\*\*

Occupation: ACCOUNTANT

Informant's Name and Relationship to Child

LESLEY-ANN JACKY

MOTHER

Registration Date:

23RD JUNE, 2009

Name of Registrar:

CAROL PASCALL DEP REG

Date of Birth: 01ST MAY, 2009

Sex:

FEMALE

Occupation:

Father's Name: JUNIOR JACKY

MANAGING DIRECTOR

Informant's Name and Relationship to Child

Registration District: TOWN OF ST. JOSEPH

Entry No:

2403

Notes:

ISSUED UNDER MY HAND AND SEAL OF OFFICE ON 08TH SEPTEMBER, 2017

CERTIFIED TRUE AND CORRECT EXTRACT FROM THE REGISTER OF BIRTHS, HELD BY REGISTRAR GENERAL'S DEPARTMENT MINISTRY OF THE ATTORNEY GENERAL AND LEGAL AFFAIRS



