



**O. L. A HOSPITAL**  
P.M.B 685  
**JOS, PLATEAU STATE.**

Birth Register ..... Volume 19B ..... Form K (B)  
Births and Deaths Ordinance 1917

**BIRTH CERTIFICATE**

Registration No.	185B/89
Date of Birth	29TH DECEMBER, 1988
Place of Birth	O.L.A. HOSPITAL, JOS
Sex of child	MALE
Full Name of Child	EDWIN ANYEBE
Name if added after Registration of Birth	ANYEBE JUNIOR
Date of Registration	10TH FEBRUARY, 1989
Full Name of Father	MR. ANDREW ENENCHE ANYEBE
Nationality or Tribe of Father	NIGERIAN/IDOMA
Full maiden name of Mother	MRS. ESTHER OBITIYE ANYEBE
Age of Mother	24 YEARS
Nationality or Tribe of Mother	NIGERIAN/IDOMA
Rank or occupation and address of Father (or, in Default, of Mother)	CIVIL SERVANT/NO. 10 ZIKS AVENUE, JOS
Signature, Relationship, if any, and address of informant	MR. E.A. ANYEBE ( FATHER )
Signature of Registrar	DR. D.G. GYANG

Certified to be the true copy of entry by the Non-Native Birth Register. DR. D.G. GYANG, O.L.A. HOSP. JOS  
Given at O.L.A. HOSPITAL JOS This 10TH Day of FEBRUARY 1989

