

FORM B1

REPUBLIC OF KENYA

THE BIRTHS AND DEATHS REGISTRATION ACT (Cap. 149)

ACKNOWLEDGEMENT OF BIRTH NOTIFICATION (FOR PARENTS)

Serial No. B1 AC 4140584

IP No 408220

1. NAME

KYAH

First name

TYLER

Middle Name

KATANA

Father's name†

2. DATE OF BIRTH

06

08

2021

Day

Month

Year

3. SEX*

Male ☒

Female ☐

4. TYPE OF BIRTH*

Single ☒

Twin ☐

OTHER, SPECIFY

5. NATURE OF BIRTH*

Born Alive ☒

Born Dead ☐

7. PLACE OF BIRTH

Sub-location or Estate and Town or health institution

KCH

Sub-County

KILIFI

8. NAME OF MOTHER

Brenda

First name

Mwaringa

Middle name

Father's name

NOTIFICATION ISSUED TO

Brenda Mwaringa

ID No.

29245654

Date

7-08-2021

Note.— To obtain a birth certificate, present this notification to the Sub-County Registrar of Births where this birth occurred