Births, Deaths and Marriages Registration Act 1997

AUSTRALIAN CAPITAL TERRITORY

BIRTH CERTIFICATE

CHILD Surname Given Names Sex Date of Birth Place of Birth	Given Name Given Name/s MALE Date of Birth O1/02/2019 Time: 13:54 CALVARY JOHN JAMES HOSPITAL, CANBERRA ACT
MOTHER Surname Former Name Given Names Date of Birth Place of Birth Occupation	CITIZEN CIVILIAN JOAN 01/03/1978 WATTLE PARK, SA TEACHER
FATHER Surname Former Name Given Names Date of Birth Place of Birth Occupation	JOHN 03/03/1969 CANBERRA, ACT CONSULTANT
MARRIAGE OF PARENTS Date of Marriage of Parents Place of Marriage of Parents	07/05/2003 WINERY, LOBETHAL, SA
PREVIOUS CHILDREN OF PARENTS Given Names (sex, date of birth)	OTHER CHILD 1 (FEMALE, 13/03/2014) OTHER CHILD 2 (UNSPECIFIED, 22/11/2018, DECEASED)
INFORMANT Name (Relationship to Child) Occupation Address	JOAN CITIZEN (MOTHER) TEACHER 15 EXAMPLE STREET, SOMEWHERE ACT 0200
REGISTRATION Registration Number Date	99999940 Registration Number 27/07/2021



I hereby certify that the above particulars are contained in an entry in the Register kept in the Australian Capital Territory.

Given under my hand and seal this 27th day of July, 2021

Certificate Number

