

MARGIN RESERVED FOR RIDING.  
WHILE FILLING, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
IN CASE OF DEATH OR MARRIAGE, USE A SEPARATE BLANK FOR EACH EVENT, AND WRITE IN  
FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 2.

MCRAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Calhoun

Township of Sixons

or  
Inc. Town of .....

or  
City of .....

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Alberta Rootman

File No.—For State Registrar Only  
**84583**

Registration District No. 802 Registered No. 166  
(For use of Local Registrar)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in or Jar of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Nov 19 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jacob Rootman

(9) PRESENT POSTOFFICE OF FATHER Cameron, S. C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (Years)

(12) BIRTHPLACE Calhoun Co

(13) OCCUPATION Farm Hand

(20) Number of children born to mother, including present birth 16

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Mack

(15) PRESENT POSTOFFICE OF MOTHER Cameron, S. C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 26 (Years)

(18) BIRTHPLACE Calhoun Co

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 16

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 8 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Caroline Johnson

(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Cameron, S. C.

Given name added from a supplemental report

(26) Witness Mrs. Keller  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Nov 21 1916 (28) W. X. Keller  
Registrar Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.