

Form No. 1

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Cherokee

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

45776

Township of Seneca

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.)

Registration District No. 1106

Registered No. 10

(2) Full Name of Child. W. J. Roof

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 1, 15, 1916
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Lawrence Roof
 (9) PRESENT POSTOFFICE OF FATHER Rodman, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)
 (12) BIRTHPLACE Cherokee Co.
 (13) OCCUPATION Farmery
 (20) Number of children born to mother, including present birth 1

MOTHER
 (14) NAME BEFORE MARRIAGE Emma Peterson
 (15) PRESENT POSTOFFICE OF MOTHER Rodman
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)
 (18) BIRTHPLACE Cherokee Co.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 11:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lawrence Robinson

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Rodman

Given name added from a supplemental report

....., 191.....

Registrar

(26) Witness J. N. Gust
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 1-17-16 (28) J. N. Gust 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.