

## (1) PLACE OF BIRTH

County of GreenvilleTownship of Sumner

City of .....

Inc. Town of .....

City of .....

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46331

Registration District No. 2205 Registered No. .... (For use of Local Registrar)

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

(2) Full Name of Child Sara Maybree Basing } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>Yes</u> <small>To be answered only in event of twins or triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 18, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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## FATHER.

(8) FULL NAME Foster Basing(9) PRESENT POSTOFFICE OF FATHER Joney Creek, S.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31 (Years)(12) BIRTHPLACE Willie Co. Sumner Township(13) OCCUPATION Farm Laborer(20) Number of children born to mother, including present birth 4

## MOTHER.

(14) NAME BEFORE MARRIAGE Elbert McCueough(15) PRESENT POSTOFFICE OF MOTHER Joney Creek, S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE Willie Co. Sumner Township(19) OCCUPATION Farm Laborer(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. P. Knight, M.D.

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

Rt 5 Honea Path, S.C.

Given name added from a supplemental report

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

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Registrar

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

(27) Filed Jan 25 1916. (28) L. D. Smith 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.

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