

AFFIDAVIT OF CORRECTION TO BIRTH RECORD
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

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Enter Correct Information Concerning Person Whose Birth Record Is Being Amended	REGISTRANT'S FULL NAME AT BIRTH			STATE FILE OR BIRTH NUMBER		
	Mary Elizabeth Mixson			139-16-064753		
	Month BIRTH DATE	Day	Year	City or Town	County	State
	June	18	1916	Hampton	South Carolina	

ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE
	Middle Name	Mary	Mary Elizabeth Mixson

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:		RELATIONSHIP
	SIGNATURE OF PARENT [OR OTHER]	WITNESS: <i>Mary Elizabeth M. Robinson</i>	Self

NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES
	November 15 1978	<i>Carolyn L. Drew</i>	February 27 1980

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:		RELATIONSHIP
	SIGNATURE OF PARENT [OR OTHER]		

NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES

DO NOT WRITE BELOW THIS LINE

ABSTRACT of Supporting Evidence [for health dept. use]	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)			DATE ORIGINAL DOCUMENT WAS MADE
	1	Own child's birth record 139-40-003962 Hampton Co., S.C.		Feb 29 1940
	2			
	3			

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	Elizabeth Mixson 23 years old	
	2		
	3		

DHEC No. 613 Rev. 2/75	ADDITIONAL INFORMATION		

I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.	ASSISTANT STATE REGISTRAR	EVIDENCE REVIEWED BY	DATE FILED
	<i>Doris M. Byrnes</i>	<i>Carolyn L. Drew</i>	11-20-78

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