

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

|   |  |              |   |              |   |                            |                      |
|---|--|--------------|---|--------------|---|----------------------------|----------------------|
| Enter Correct Information Concerning Person Whose Birth Record is Being Amended | REGISTRANT'S FULL NAME AT BIRTH<br>Lee Toy Brown   |              |   |              | STATE FILE OR BIRTH NUMBER<br>139-22-004436 |                            |                      |
|   | BIRTH DATE   | Month<br>Feb | Day<br>19   | Year<br>1922 | BIRTH PLACE                                 | City or Town<br>Greenville | County<br>Greenville |
| ITEMS TO BE AMENDED OR CORRECTED  | ITEM OMITTED OR IN ERROR   |              | BIRTH CERTIFICATE SHOWS                             |              |   | SHOULD BE                  |                      |
|   | child's given name   |              | L. J.   |              |   | Lee Toy Brown              |                      |
|   |  |              |   |              |   |                            |                      |
| AFFIDAVIT   | I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:<br>SIGNATURE OF PARENT (OR OTHER)<br><i>Lee T Brown</i> |              |   |              | RELATIONSHIP<br>self                        |                            |                      |
| NOTARY (AFFIX SEAL)   | SUBSCRIBED AND SWORN TO BEFORE ME ON<br>Sep 16 19 83   |              | SIGNATURE OF NOTARY<br><i>Mary Louise McAlister</i> |              | NOTARY COMMISSION EXPIRES<br>Oct 29 19 90   |                            |                      |
| AFFIDAVIT   | I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:<br>SIGNATURE OF PARENT (OR OTHER)                       |              |   |              | RELATIONSHIP                                |                            |                      |
| NOTARY (AFFIX SEAL)   | SUBSCRIBED AND SWORN TO BEFORE ME ON<br>19   |              | SIGNATURE OF NOTARY                                 |              | NOTARY COMMISSION EXPIRES<br>19             |                            |                      |

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   | marriage license #2164, Greenville, S. C. | 11-30-62                        |
| 2   |   |                                 |
| 3   |   |                                 |
| INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE |   |                                 |
| 1   | Lee Toy Brown, age 40 years, 9 months     |                                 |
| 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<br><i>Ann H. Owens HP</i> | EVIDENCE REVIEWED BY<br><i>Mary Louise McAlister</i> | DATE FILED<br><i>Sep 21, 1983</i> |
|  | 1584  |  |                                   |