

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

Page 2 of 2

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH Mary Elizabeth Simmons				STATE FILE OR BIRTH NUMBER 139-16-086556		
	Month BIRTH DATE	Day	Year	City or Town	County	State	
	Oct	1	1916		Marion	S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's name		Elizabeth Stephens		Mary Elizabeth Stephens		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Mary E. Stephens</i>				RELATIONSHIP self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON 19		SIGNATURE OF NOTARY <i>[Signature]</i>		NOTARY COMMISSION EXPIRES 19		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Mary Elizabeth S. Simmons</i>				RELATIONSHIP Self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>September 22 1978</i>		SIGNATURE OF NOTARY <i>Dr. D. Dr. John</i>		NOTARY COMMISSION EXPIRES <i>Feb. 28 1981</i>		
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	US Army Cert of Service # N 724 201 Given at Sep Center Ft Bragg, NC					Jan 24, 1946
	2						
	3						
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
	1	Mary E. Stephens (DOB Oct 1, 1916)					
	2						
	3						
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 <i>Doris M. Byars BE</i>		EVIDENCE REVIEWED BY <i>Barbara H. Freeman</i>		DATE FILED 10-3-78	

DHEC No. 613

Rev. 2/75

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