

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

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021422/m

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH				STATE FILE OR BIRTH NUMBER			
	Joseph Amos Allen				139-22-004592			
BIRTH DATE	Month	Day	Year	City or Town	County	State		
	Feb.	7	1922	BIRTH PLACE	Horry	SC		
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE			
	Child's given name		Omitted		Joseph Amos Allen			
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:				RELATIONSHIP			
SIGNATURE OF PARENT (OR OTHER)	<i>Joseph Amos Allen</i>				<i>Self</i>			
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON	SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES				
	<i>May 7 1986</i>	<i>Debra H. Sherman</i>		<i>8-10 1993</i>				
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				
	19			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	Child's birth certificate No. 55 002016 Columbia, S. C.					Feb 02 1955	
	2							
	3							
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
1	Joseph Amos Allen Age: 32							
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			
			<i>Ann L. Owens</i>		<i>J. W. Watson</i>			
					DATE FILED			
					05-19-86			

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