

**AFFIDAVIT 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><b>Archie Lee Hatcher</b> |                      |                  |                     | STATE FILE OR BIRTH NUMBER<br><b>139-16-073261</b> |                              |                        |
|   | BIRTH DATE   | Month<br><b>July</b> | Day<br><b>30</b> | Year<br><b>1916</b> | BIRTH PLACE  | City or Town<br><b>Horry</b> | County<br><b>Horry</b> |

|   |                          |                         |                    |
|---|--------------------------|-------------------------|--------------------|
| <b>ITEMS TO BE AMENDED OR CORRECTED</b> | ITEM OMITTED OR IN ERROR | BIRTH CERTIFICATE SHOWS | SHOULD BE          |
|   | Child's name             | Robert Hatcher          | Archie Lee Hatcher |
|   |                          |                         |                    |

|                  |  |                           |              |      |
|------------------|--|---------------------------|--------------|------|
| <b>AFFIDAVIT</b> | I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:<br>SIGNATURE OF PARENT (OR OTHER) | <i>Archie Lee Hatcher</i> | RELATIONSHIP | self |
|------------------|--|---------------------------|--------------|------|

|                            |                                      |                   |                     |                          |  |
|----------------------------|--------------------------------------|-------------------|---------------------|--------------------------|--|
| <b>NOTARY (AFFIX SEAL)</b> | SUBSCRIBED AND SWORN TO BEFORE ME ON | 31st January 1978 | SIGNATURE OF NOTARY | <i>Caroline A. Inman</i> | NOTARY COMMISSION EXPIRES<br>NOTARY PUBLIC FOR SOUTH CAROLINA<br>My Commission expires June 7, 1986 19 |
|----------------------------|--------------------------------------|-------------------|---------------------|--------------------------|--|

|                  |  |  |              |  |
|------------------|--|--|--------------|--|
| <b>AFFIDAVIT</b> | I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:<br>SIGNATURE OF PARENT (OR OTHER) |  | RELATIONSHIP |  |
|------------------|--|--|--------------|--|

|                            |                                      |    |                     |  |                           |    |
|----------------------------|--------------------------------------|----|---------------------|--|---------------------------|----|
| <b>NOTARY (AFFIX SEAL)</b> | SUBSCRIBED AND SWORN TO BEFORE ME ON | 19 | SIGNATURE OF NOTARY |  | NOTARY COMMISSION EXPIRES | 19 |
|----------------------------|--------------------------------------|----|---------------------|--|---------------------------|----|

**DO NOT WRITE BELOW THIS LINE**

|   |  |  |                                 |
|---|--|--|---------------------------------|
| <b>ABSTRACT of Supporting Evidence [for health dept. use]</b> | NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE) |  | DATE ORIGINAL DOCUMENT WAS MADE |
|   | 1  | Own Social Security Appl.; Baltimore, Md. #247-26-5802 | 9-1939                          |
|   | 2  |  |                                 |
|   | 3  |  |                                 |

|   |   |                                     |
|---|---|-------------------------------------|
| <b>ABSTRACT of Supporting Evidence [for health dept. use]</b> | INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE |                                     |
|   | 1   | Archie Lee Hatcher DOB: Jul 30 1916 |
|   | 2   |                                     |
|   | 3   |                                     |

|                     |                        |  |  |
|---------------------|------------------------|--|--|
| <b>DHEC No. 613</b> | ADDITIONAL INFORMATION |  |  |
|---------------------|------------------------|--|--|

|                              |  |  |   |                              |
|------------------------------|--|--|---|------------------------------|
| Rev. 2/75<br><br><b>1628</b> | 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>Sherris M. Bryan</i> | EVIDENCE REVIEWED BY<br><i>Mary Drake</i> | DATE FILED<br><b>3/23/78</b> |
|------------------------------|--|--|---|------------------------------|