

36374 2-27-22f 36375

## AFFIDAVIT OF CORRECTION TO BIRTH RECORD

1982 2 28 2

## 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		STATE FILE OR BIRTH NUMBER		
	Eloise Wynn		139 22 003014		
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month Day Year Feb 20 1922	BIRTH PLACE	City or Town County State Anderson SC	
	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS	SHOULD BE	
	Given name in error		Ella Louise	Eloise Wynn	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT [OR OTHER] <i>Eloise Robinson</i>			RELATIONSHIP Self	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>September 24 1982</i>		SIGNATURE OF NOTARY <i>Jeannine M. Tidwell</i>	NOTARY COMMISSION EXPIRES <i>March 24 1990</i>	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT [OR OTHER]			RELATIONSHIP	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON 19		SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES 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	The Independent Life Ins Co Pol# L030048A Jacksonville Fla			Mar 21 1960
	2				
	3				
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE				
	1	Eloise Robinson age 39 next birthday			
	2				
	3				
DHEC No. 613	ADDITIONAL INFORMATION				
Rev. 2/75	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>Ann S. Owens</i>	EVIDENCE REVIEWED BY <i>Ann Hardin</i>	
				DATE FILED <i>9-28-82</i>	