

**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 <b>John Perry Lowry</b>			STATE FILE OR BIRTH NUMBER <b>139-22-004734</b>		
	BIRTH DATE Month <b>Feb</b>	Day <b>24</b>	Year <b>1922</b>	BIRTH PLACE City or Town <b>Lancaster</b>	County <b>Lancaster</b>	State <b>South Carolina</b>
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS SHOULD BE		
	Child's Given Name			Unnamed LOWRY		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>John Perry Lowry</i>				RELATIONSHIP <b>Self</b>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>March 29</i> 19 <i>82</i>		SIGNATURE OF NOTARY <i>Alicia J. Kulpatich</i>		NOTARY COMMISSION EXPIRES <i>March 30</i> 19 <i>89</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	Springs Mills, Inc. Personnel Record, Kershaw, S. C.	Oct 23 1969
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	John Perry (Lowery) - DOB: Feb 24 1922	
2		
3		

**DHEC No. 613**

Rev. 2/75

**ADDITIONAL INFORMATION**

Document submitted verifies given name as John Perry

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 G. Owens</i> / <i>82</i>	EVIDENCE REVIEWED BY <i>Alicia Kulpatich</i>	DATE FILED <b>3-31-82</b>

*1450*