

AFFIDAVIT OF 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 Richard Arthur Wiles						STATE FILE OR BIRTH NUMBER 139-16-088645	
	BIRTH DATE	Month Nov.	Day 26	Year 1916	BIRTH PLACE	City or Town RTD Elloroe	County Calhoun	State SC
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS			SHOULD BE		
	date of birth		Nov. 25			November 26, 1916		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Richard Arthur Wiles</i>						RELATIONSHIP self	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>September 4,</i> 19 <i>76</i>			SIGNATURE OF NOTARY <i>Patricia W. Hope</i>		NOTARY COMMISSION EXPIRES <i>2-19-</i> 19 <i>80</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	US Social Security Appl. No. 251-14-9667, Baltimore, Md.	1-11-39
	2		
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	November 26	
	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 <i>Doris M B yers</i>	EVIDENCE REVIEWED BY <i>Jesse Kammer</i>
			DATE FILED 9-23-76