

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 Lillie Belle Byrd			STATE FILE OR BIRTH NUMBER 139-16-047302	
	BIRTH DATE	Month Day Year January 17, 1916	BIRTH PLACE	City or Town	County
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE
	Child's given name		Jane		Lillie Belle Byrd
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. SIGNATURE OF PARENT (OR OTHER) <i>Lillie Belle Byrd Watson</i>				RELATIONSHIP self
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>Jan. 5 1976</i>		SIGNATURE OF NOTARY <i>Helen P. Blackwood</i>		NOTARY COMMISSION EXPIRES <i>March 4 1980</i>
ABSTRACT of Supporting Evidence (for health dept. use)	DO NOT WRITE BELOW THIS LINE				
	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)				DATE ORIGINAL DOCUMENT WAS MADE
	1	own marriage license, filed in Richland Co, Probate office, Columbia, S.C.			4-17-44
	2				
	3				
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE				
	1				
2	LILLIE BELLE BYRD				
3					
DHEC No. 613 Rev. 11/73	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>Louis M. Byrd</i> ES	EVIDENCE REVIEWED BY <i>Earl Bleakley</i>		DATE FILED <i>1-5-76</i>