

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH				STATE FILE OR BIRTH NUMBER			
	JAMES WALLACE BRIDGES				139 22 003108			
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month JAN	Day 09	Year 1922	BIRTH PLACE	City or Town ANDERSON	County ANDERSON	State SC
	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE	
	GIVEN NAME				WILLIAM		JAMES WALLACE BRIDGES	
	DATE OF BIRTH				JAN 04 1922		JAN 09 1922	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)					RELATIONSHIP SELF		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES			
	July 2 1985		Sandra Black		May 8 1995			
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		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES			
	19				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	MARRIAGE LICENSE # 957, GREENVILLE CO., GREENVILLE, S.C.	APR 29 1948
	2	ARMY DISCHARGE # 34 517 275 FT BRAGG, N.C.	OCT 29 1945
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
* DHEC No. 613 Rev. 2/75	1	JAMES WALLACE BRIDGES AGE 26	
	2	DOB: JAN 09 1922 JAMES W. BRIDGES	
	3		
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	EVIDENCE REVIEWED BY
1377		<i>Ann D. O'Connell</i>	<i>Sandra Black</i>
			DATE FILED 7-17-85