

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 Corina Phipps				STATE FILE OR BIRTH NUMBER 139-22-050290	
	BIRTH DATE	Month Jan	Day 5	Year 1922	BIRTH PLACE City or Town Horry	County State S.C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Child's name		Carinta Phipps		Corina Phipps	
	Father's name		Lutha Phipps		Luther W. Phipps	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Corina Phipps White</i>				RELATIONSHIP self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>Dec. 17</i> 19 <i>77</i>		SIGNATURE OF NOTARY <i>Reguelia Manning</i>		NOTARY COMMISSION EXPIRES <i>Nov. 7, 1981</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		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES	

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	Social Security Appl.; Baltimore, Md. #247-22-8123	12-1955
2	Social Security Appl.; Baltimore, Md. #247-22-8123	12-1955
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	Corina Phipps(White) DOB: Jan 5 1922	
2	Luther W Phipps	
3		

DHEC No. 613

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>Adewo M. Byars md</i>	EVIDENCE REVIEWED BY <i>Mary Drake</i>	DATE FILED <i>1-5-78</i>
	1740		