

M/2-8-22 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 Joseph W Murph				STATE FILE OR BIRTH NUMBER 139-22-002213		
	BIRTH DATE	Month Jan	Day 22	Year 1922	BIRTH PLACE	County Orangeburg	State SC
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's given name		Wesley		Joseph W Murph		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Joseph W Murph</i>				RELATIONSHIP SELF		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>June 21</i> 19 <i>88</i>		SIGNATURE OF NOTARY <i>Delano A. Biddick</i>		NOTARY COMMISSION EXPIRES NOTARY PUBLIC, State of New York No. 4929412 19		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)				RELATIONSHIP Notary Public in Westchester County Term Expires May 2, 1990		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON		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 ARMY discharge Serial #34 654 549 Ft. Bragg, NC					04-27-1943
	2						
	3						
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE							
1	Joseph W Murph DOB: 01-22-1922						
2							
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 <i>Ann B. Peters</i>		EVIDENCE REVIEWED BY <i>Myra T. Strickland</i>	DATE FILED <i>7-1-88</i>	

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