

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 Elizabeth Ellerbe			STATE FILE OR BIRTH NUMBER 139-16-084987			
	BIRTH DATE	Month November	Day 27,	Year 1916	CITY OR TOWN Chesterfield	COUNTY S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's Given Name		Lizzie Ellerbe		Elizabeth Ellerbe		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Elizabeth E. Hughes.</i>			RELATIONSHIP Self			
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON January 3, 19 79		SIGNATURE OF NOTARY <i>Lena R. Brooks</i>		NOTARY COMMISSION EXPIRES April 14, 19 82		
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	Daughter's Birth Record#139-36-012049,VR,Columbia, S.C.				May 25,1936	
	2						
	3						
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE							
1	Elizabeth Ellerbe-(Age 19)						
2							
3							
DHEC No. 613	ADDITIONAL INFORMATION						
Rev. 2/75 <i>0101</i>	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. Byars Jr</i>		EVIDENCE REVIEWED BY <i>Lena R. Brooks</i>		
					DATE FILED 1-5-79		