

**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	<b>REGISTRANT'S FULL NAME AT BIRTH</b> Leno McMichael			<b>STATE FILE OR BIRTH NUMBER</b> 139-23- 048987			
	<b>BIRTH DATE</b> Month Jan	<b>Day</b> 2	<b>Year</b> 1923	<b>BIRTH PLACE</b> City or Town Orangeburg	<b>County</b> Orangeburg	<b>State</b> SC	
<b>ITEMS TO BE AMENDED OR CORRECTED</b>	<b>ITEM OMITTED OR IN ERROR</b>			<b>BIRTH CERTIFICATE SHOWS</b>		<b>SHOULD BE</b>	
	Child's Name			Lenon McMichael		Leno McMichael	
	Date of Birth			Dec 2, 1922		Jan 2, 1923	
	Sex			Male		Female	
<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:					<b>RELATIONSHIP</b>	
<b>NOTARY (AFFIX SEAL)</b>	SIGNATURE OF PARENT (OR OTHER) <i>Leno M. Robinson</i>			SIGNATURE OF NOTARY <i>John B. Stoman</i>		<b>SELF</b>	
	SUBSCRIBED AND SWORN TO BEFORE ME ON September 21 1983			NOTARY COMMISSION EXPIRES September 24 1991			
<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:					<b>RELATIONSHIP</b>	
<b>NOTARY (AFFIX SEAL)</b>	SIGNATURE OF PARENT (OR OTHER)			SIGNATURE OF NOTARY		<b>NOTARY COMMISSION EXPIRES</b>	
	SUBSCRIBED AND SWORN TO BEFORE ME ON 19			NOTARY COMMISSION EXPIRES 19			
DO NOT WRITE BELOW THIS LINE							
<b>ABSTRACT of Supporting Evidence (for health dept. use)</b>	<b>NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)</b>					<b>DATE ORIGINAL DOCUMENT WAS MADE</b>	
	1	Social Security Application #579-26-2454 Baltimore Md					Jun 1942
	2	Same as #1					
	3	Same as #1					
	<b>INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE</b>						
	1	Leno McMichael DOB: Jan 2 1923					
	2	Jan 2 1923					
	3	Female					
<b>REC No. 613</b> Rev. 2/75	<b>ADDITIONAL INFORMATION</b>						
I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.		<b>ASSISTANT STATE REGISTRAR</b> <i>Ann G. Over</i>		<b>EVIDENCE REVIEWED BY</b> <i>Becky Bell</i>		<b>DATE FILED</b> 10/2/83	

This document is a true and correct copy of the original document as it appears in the files of the South Carolina Department of Health and Environmental Control. It is not to be used as evidence in any court of law.

1167