

**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 Leno McMichael			STATE FILE OR BIRTH NUMBER 139-23- 048987		
	BIRTH DATE	Month Jan	Day 2	Year 1923	BIRTH PLACE	County Orangeburg
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE
	Child's Name			Lenon McMichael		Leno McMichael
	Date of Birth			Dec 2, 1922		Jan 2, 1923
	Sex			Male		Female
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:					RELATIONSHIP
	SIGNATURE OF PARENT (OR OTHER) <i>Leno M. Robinson</i>			SIGNATURE OF NOTARY <i>Jean B. Stoman</i>		SELF
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON September 21 1983			NOTARY COMMISSION EXPIRES September 24 1991		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:					RELATIONSHIP
	SIGNATURE OF PARENT (OR OTHER)			SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES
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	Social Security Application #579-26-2454 Baltimore Md	Jun 1942
2	Same as #1	
3	Same as #1	
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	Leno McMichael DOB: Jan 2 1923	
2	Jan 2 1923	
3	Female	

REC No. 613  
Rev. 2/75

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

*Aug G. Owen*

EVIDENCE REVIEWED BY

*Becky Bell*

DATE FILED

10/2/83

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