

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				STATE FILE OR BIRTH NUMBER			
	Louvenia Garvin				139-22-003176			
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month Feb	Day 25	Year 1922	BIRTH PLACE	City or Town Barnwell	County SC	State
	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given Name of Child				Eloise Garvin		Louvenia Garvin	
	Date of Birth				Feb 24 1922		Feb 25 1922	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:						RELATIONSHIP	
NOTARY (AFFIX SEAL)	SIGNATURE OF PARENT (OR OTHER) <i>Louvenia Anderson</i>				SIGNATURE OF NOTARY <i>Deborah L. Wyatt</i>		Self	
AFFIDAVIT	SUBSCRIBED AND SWORN TO BEFORE ME ON June 13 1991				NOTARY COMMISSION EXPIRES DEBORAH L. WYATT Notary Public, State of New York No. 414865121		RELATIONSHIP Qualified in Queens County Commission Expires Sept 15, 1992	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON 19				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	Board of Elections printout #01051151	Queens, NY 1-18-82	
	2	Same as item #1		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	1 Louvenia (Anderson)			
	2 Feb 25 1922			
	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>Murray B. Anderson</i>	EVIDENCE REVIEWED BY <i>Jeannette Grayson</i>	DATE FILED 7-1-91

DHEC No. 613
Rev. 2/75

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