

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 JAMES PERRY SMITH				STATE FILE OR BIRTH NUMBER 139-16-046455		
	BIRTH DATE	Month Jan	Day 2	Year 1916	BIRTH PLACE	City or Town Hodges	County Greenwood
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given Name			James Peary		James Perry	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>James Perry Smith</i>				RELATIONSHIP Self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON Feb 5		19 76	SIGNATURE OF NOTARY <i>Deloris B Moore</i>		NOTARY COMMISSION EXPIRES March 11 19 85	

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	S.C. Driver's License #92205, Greenwood, S.C.	Jun 21 1957
2		
3		

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE

1	James Perry Smith
2	
3	

DHEC No. 613

Rev. 11/73

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>Paris M. Byaw</i>	EVIDENCE REVIEWED BY <i>Deloris B Moore</i>	DATE FILED 2-13-76
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