

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 Louise Wood						STATE FILE OR BIRTH NUMBER 139-22-000698	
	BIRTH DATE	Month Jan	Day 6	Year 1922	BIRTH PLACE	City or Town	County	State
						Cherokee	SC	

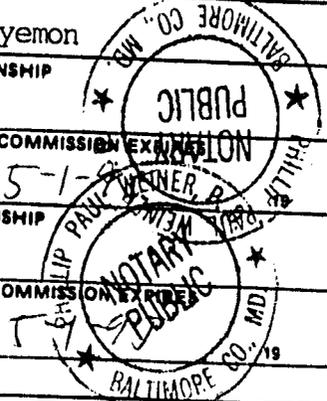
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE
	Child's Full Name	Omitted	Louise Wood
	Date of Birth	January 5, 1922	January 6, 1922
	Father's Given Name	Berriman	Beryemon

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Louise Dye</i>		RELATIONSHIP Self
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NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>August 3rd 1990</i>	SIGNATURE OF NOTARY <i>William V. Wood</i>	NOTARY COMMISSION EXPIRES 5-1-91
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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 #239-18-3707, Baltimore, MD	October 1945
	2	Same as Above	
	3	Same as Line #1	

DHEC No. 613 Rev. 2/75	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	Louise (Dye)	
	2	DOB: January 06, 1922	
	3	Beryemon - Father's Given Name	
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>Ann G. Owens, bms</i>	EVIDENCE REVIEWED BY <i>Brenda R. Muhammad</i>	DATE FILED 8-8-90
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