

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				STATE FILE OR BIRTH NUMBER	
	Johnnie Boykin				139-22-004062	
	BIRTH DATE	Month	Day	Year	CITY OR TOWN	COUNTY
	Feb	12	1922	Fairfield	SC	State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given Name		Ben Boykin		Johnnie Boykin	
	Surname Clarification				Boykin	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>John Boykin</i>				RELATIONSHIP Self	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON Jan 6 19 84		SIGNATURE OF NOTARY <i>Jeannette Haynes</i>		NOTARY COMMISSION EXPIRES Sep 7 1989 19	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)				RELATIONSHIP	
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	Daughter's Birth Record #47-033896 VR Columbia SC				Aug 28 1947
	2					
	3					
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
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				EVIDENCE REVIEWED BY	
	<i>Ann B. Owens</i>				<i>Jeannette Haynes</i>	
					DATE FILED 1-6-84	

DHEC No. 613

Rev. 2/75

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