

**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 <b>ERA WALKER</b>		STATE FILE OR BIRTH NUMBER <b>139-22-000896</b>	
	BIRTH DATE Month Day Year <b>JAN 11 1922</b>	BIRTH PLACE City or Town <b>COLLETON CO, S.C.</b>	County	State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE	
	GIVEN NAME	<b>ESSIE</b>	<b>ERA WALKER</b>	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Era Walker Cochran</i>		RELATIONSHIP <b>SELF</b>	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <b>JAN. 16 19 81</b>	SIGNATURE OF NOTARY <i>Victor M. Bowes</i>	NOTARY COMMISSION EXPIRES My Commission Expires May 28, 1983 Chester Township, Delaware Co., Pa <sup>19</sup>	
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	Own Marriage Cert. N 10,927	Walterboro, S.C.
2		Sep 02 1942
3		

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	
1	Era Walker 20
2	
3	

DHEC 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 <i>Ann H. Owens</i>	EVIDENCE REVIEWED BY <i>Jacqueline Hudson</i>	DATE FILED <b>1-30-81</b>

*1322*