

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 Lalie Mae Pearson		STATE FILE OR BIRTH NUMBER 139-16-068301		
	BIRTH DATE Month Day Year July 17 1916	BIRTH PLACE Fairfield	City or Town SC	County SC	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		
	Child's given name		Lallie May		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>X Lallie Mae Pearson</i>		RELATIONSHIP self		
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>July 8 1976</i>	SIGNATURE OF NOTARY <i>Charles M. Taylor</i>	NOTARY COMMISSION EXPIRES <i>May 12 1986</i>		
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	Social Security Appli. #248-36-3799, Baltimore, Md.			6-17-43
	2				
	3				
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE				
	1	LALIE MAE			
2					
3					
DHEC No. 613	ADDITIONAL INFORMATION				
Rev. 2/75	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>Doris M. Byars</i>	EVIDENCE REVIEWED BY <i>Earl Blackley</i>	
				DATE FILED <i>7-8-76</i>	