

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			STATE FILE OR BIRTH NUMBER				
	Virginia Penelope Grant			139-22-002163				
BIRTH DATE	Month	Day	Year	BIRTH PLACE	City or Town	County	State	
	Jan.	31	1922		Eutawville	Orangburg	S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Given Name			Mary		Virginia Penelope		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Virginia P. Grant Semmons</i>					RELATIONSHIP Self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>Dec. 17</i> 19 <i>23</i>			SIGNATURE OF NOTARY <i>Helma L. Zeigler</i>		NOTARY COMMISSION EXPIRES <i>January 11</i> 19 <i>83</i>		
ABSTRACT of Supporting Evidence (for health dept. use)	DO NOT WRITE BELOW THIS LINE							
	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)						DATE ORIGINAL DOCUMENT WAS MADE	
	1	N.C. Mutual Life Ins. Pol. #289293 Durham, N.C.					Mar. 19, 1923	
	2							
	3							
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE							
1	Virginia Penelope Grant							
2								
3								
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>Doris M. Byars</i>		EVIDENCE REVIEWED BY <i>Connerd. Clayton</i>		DATE FILED <i>2-19-76</i>

DHEC No. 613

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