



Affidavit of Correction to Birth Record
Division of Vital Records

Date 01/14/2016

The birth certificate of JAMES ALTON CANNON
is not the same in every respect as
requested by you.

The affidavit below is sufficient for some minor corrections; however, other corrections must be supported by
submission of documentary evidence. See the enclosed instructions for corrections that require documentary
evidence or the signatures of both parents.

Rec'd Vital Records

FEB 03 2016

1. Complete only the upper half of the affidavit.
2. Use black typewriter ribbon or print using black or blue-black ink.
3. Affidavit must be signed in the presence of a notary public or other officer having official seal.
4. Signatures must be written, NOT printed.
5. Affidavit must be signed as outlined in enclosed instructions.
6. Affidavit is not acceptable if erasures or alterations are made.

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 JAMES ALTON CANNON		STATE FILE OR BIRTH NUMBER 139-22-003233
	BIRTH DATE Month February Day 13, Year 1922	BIRTH PLACE City or Town Berkeley County State SC	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS SHOULD BE
	Child's Given Name		Omitted James Alton Cannon
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. SIGNATURE OF PARENT (OR OTHER) <i>James Alton Cannon</i>		RELATIONSHIP ADULT CHILD
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>January 25, 2016</i> SIGNATURE OF NOTARY <i>Jeanette Grayson</i>		NOTARY COMMISSION EXPIRES <i>February 12, 2018</i>
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. SIGNATURE OF PARENT (OR OTHER) <i>James Alton Cannon, Jr.</i>		RELATIONSHIP
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES
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. Own Child's Birth Certificate, 139-46-039766, DVR, Columbia SC		11/16/1946
	2.		
	3.		
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE.		
	1. Father: James Alton Cannon Age: 24		
2.			
3.			
ADDITIONAL INFORMATION REGISTRANT IS DECEASED			
I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.		REGISTRAR <i>Jeanette Grayson</i>	EVIDENCE REVIEWED BY <i>Jeanette Grayson</i>
		DATE FILED <i>2-11-2015</i>	

0621-1780

5