



**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		STATE FILE OR BIRTH NUMBER	
	JAMES ALTON CANNON		139-22-003233	
	BIRTH DATE	Month Day Year February 13, 1922	BIRTH PLACE City or Town County State Berkeley 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 Haysom</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	
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 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 Haysom</i>	EVIDENCE REVIEWED BY <i>Jeanette Haysom</i>	
			DATE FILED <i>2-11-2015</i>	

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