

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

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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			
	John Trezvant Fletcher				16-085458			
	BIRTH DATE	Month	Day	Year	BIRTH PLACE	City or Town	County	State
		November	2	1916	Winnsboro	Fairfield	S. C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS			SHOULD BE
	Child's name				un-named			John Trezvant Fletcher
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:						RELATIONSHIP	
	SIGNATURE OF PARENT (OR OTHER) <i>K John Trezvant Fletcher</i>						self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON			SIGNATURE OF NOTARY			NOTARY COMMISSION EXPIRES	
	January 30 1978			<i>Clayne W. Lantz</i>			Notary Public, State of Florida at Large My Commission Expires Feb. 25, 1979 19	
ABSTRACT of Supporting Evidence (for health dept. use)	DO NOT WRITE BELOW THIS LINE Bonded by American Fire & Casualty Co.							
	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)							DATE ORIGINAL DOCUMENT WAS MADE
	1	Child's Birth Cert. (no number) Scotland Co., N. C.						8-8-52
	2							
	3							
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
1	Name: John Trezvant Fletcher			Birthdate: 11-2-16				
2								
3								
DHEC No. 613 Rev. 11/73	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>Darwin M. Byars</i>		EVIDENCE REVIEWED BY <i>Bonnie J. Bone, Deputy Registrar</i>		DATE FILED <i>2-28-78</i>

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