

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 Annie Sue Addison				STATE FILE OR BIRTH NUMBER 139-16-058422	
	BIRTH DATE	Month May	Day 3,	Year 1916	CITY OR TOWN Anderson	COUNTY SC
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Child's given name		Sam M. Addison Jr		Annie Sue Addison	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE XXXXXXXXXX <i>✓ Annie Sue A. Fields</i>				RELATIONSHIP SELF	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>February 28</i> 19 78		SIGNATURE OF NOTARY <i>[Signature]</i>		NOTARY COMMISSION EXPIRES <i>January 1</i> 19 80	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE XXXXXXXXXX				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	Own marriage license #1140 Greenville County, SC	7/14/34		
	2				
	3				
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
1	Annie Sue Addison - age 18				
2					
3					
ADDITIONAL INFORMATION					
DHEC No. 613 Rev. 2/75 0976		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>Walter M. Beason</i>	EVIDENCE REVIEWED BY <i>Walter M. Beason</i>	DATE FILED 3/8/78