

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		
	DONNIE BANKS			139 22 002260		
	Month	Day	Year	City or Town	County	State
	BIRTH DATE	January 14 1922		BIRTH PLACE	Pickens	S.C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE
	Given name			Louise Banks		Donnie Banks
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Donnie Banks Massery</i>					RELATIONSHIP self
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON March 24 1980 19			SIGNATURE OF NOTARY <i>Edna S Venable</i>		NOTARY COMMISSION EXPIRES December 12 1983 19
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)					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	Daughter's Birth Cert #139 51 020528 Pickens County, S.C.	Mar 31 1951
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	Name: Donnie Banks 29 yrs.	
2		
3		

DHEC No. 613

Rev. 2/75

ADDITIONAL INFORMATION		EVIDENCE REVIEWED BY	DATE FILED
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>Ann H. Johnson</i> Deputy County Registrar	<i>Edna S Venable</i> 3-26-80

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