

**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 Waymes Oliver			STATE FILE OR BIRTH NUMBER 139-16-073026			
	BIRTH DATE	Month July 18,	Day 1916	Year	BIRTH PLACE City or Town Greenville,	County State S. C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's given name		Wayne		Waymes		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Waymes Oliver</i>			RELATIONSHIP Self			
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON July 28, 19 76		SIGNATURE OF NOTARY <i>Margaret Katherine Berry</i>		NOTARY COMMISSION EXPIRES Feb. 16, 19 81		
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		
<b>DO NOT WRITE BELOW THIS LINE</b>							
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	Son's birth cert. #139-45-044766, BVS, Columbia, S. C.					Nov. 5, 1945
	2						
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
	1	Waymes Oliver					
	2						
DHEC No. 613 Rev. 2/75	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>W. M. Bryan</i>		EVIDENCE REVIEWED BY <i>Katherine B. Berry</i>	DATE FILED 8-19-76	