

**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 <b>Earlease Roper</b>				STATE FILE OR BIRTH NUMBER <b>139-22-003485</b>	
	BIRTH DATE	Month <b>Feb.</b>	Day <b>18,</b>	Year <b>1922</b>	BIRTH PLACE <b>Charleston</b>	County <b>Charleston</b>
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	given name		Sarah		Earlease Roper	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>✓ Earlease Roper</i>				RELATIONSHIP self	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <b>May 19 19 82</b>		SIGNATURE OF NOTARY <i>James B. Blount</i>		NOTARY PUBLIC FOR THE STATE OF SOUTH CAROLINA My Commission expires June 11, 1989 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	Birth Certificate of son #139-52-055177, Charleston, S.C.	Dec. 16, 1952
	2		
	3		
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	Earlease Roper, age 30 yr.	
	2		
	3		
DHEC No. 613	ADDITIONAL INFORMATION		
Rev. 2/75	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 G. Owen</i>	EVIDENCE REVIEWED BY <i>Yvonne B. McQuinn</i>
<i>1215</i>			DATE FILED <i>5-26-82</i>