

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			STATE FILE OR BIRTH NUMBER		
	Margaret Whitfield			139-16 069980		
	Month	Day	Year	City or Town	County	State
	BIRTH DATE		BIRTH PLACE			
	Jul 18 1916		Pickens		S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given name		unnamed		Margaret	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Margaret W. Allison</i>				RELATIONSHIP self	
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON April 6 19 78		SIGNATURE OF NOTARY <i>Edna S. Venable</i>		NOTARY COMMISSION EXPIRES December 12 19 83	
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	S.C. Drivers License 632320 Columbia, S.C.				Apr 28 1949
	2					
	3					
DHEC No. 613 Rev. 2/75 1956	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
	1	Name: Margaret Whitfield Allison DOB 7-18-16				
	2					
	3					
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>Doris M. Byrnes</i>		EVIDENCE REVIEWED BY <i>Edna S. Venable</i> Deputy County Registrar		
				DATE FILED 4-17-78		