

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 WOODROW WILSON BLACK			STATE FILE OR BIRTH NUMBER 139-16-059093				
	BIRTH DATE	Month May	Day 3,	Year 1916	BIRTH PLACE	City or Town Cherokee,	County S. C.	State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's name			Woodrow		WOODROW WILSON BLACK		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Woodrow W. Black</i>					RELATIONSHIP Same		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON March 22, 1976		SIGNATURE OF NOTARY <i>Virginia P. Mabrey</i>		NOTARY COMMISSION EXPIRES Jan. 17, 1983			
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	Army separation papers, Serial #34 010 332, filed Ft. Bragg, N. C.					Sept. 26, 1945	
	2							
	3							
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
1	WOODROW WILSON BLACK							
2								
3								
DHEC No. 613 Rev. 11/73	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. Beyars</i>		EVIDENCE REVIEWED BY <i>Virginia P. Mabrey</i>		DATE FILED 4-2-76		