

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			
	Helen Veronica Smith			139-22-000481			
	Month	Day	Year	City or Town	County	State	
BIRTH DATE	January	1	1922	BIRTH PLACE	Charleston	S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given name			omitted		Helen Veronica	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Helen Veronica Smith Porter</i>				RELATIONSHIP self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON July 30 19 76		SIGNATURE OF NOTARY <i>Dorothy G. Pearlstone</i>		NOTARY COMMISSION EXPIRES DOROTHY G. PEARLSTONE NOTARY PUBLIC FOR SOUTH CAROLINA My Commission expires August 31, 1980		
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	Son's birth certificate #139-52-000554 Charleston, S.C.					Filed 1-21-52
	2						
	3						
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
	1	Helen Veronica age 30					
	2						
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>Donis MB yess</i>		EVIDENCE REVIEWED BY <i>Judith A. Breece</i>	DATE FILED 8-17-76	

DHEC No. 613

Rev. 2/75