

# 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 <b>Clara Mamie Hodgens</b>				STATE FILE OR BIRTH NUMBER <b>139-16-073051</b>		
	BIRTH DATE	Month <b>Jul</b>	Day <b>19</b>	Year <b>1916</b>	BIRTH PLACE	City or Town <b>Greenville</b>	County <b>Greenville</b>
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE
	child's given name				Mamie Ethel		Clara Mamie
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Clara H. Kilby</i>					RELATIONSHIP <b>self</b>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <b>Apr. 28 1976</b>			SIGNATURE OF NOTARY <i>Mary Ann C. Malister</i>		NOTARY COMMISSION EXPIRES <b>19</b>	
ABSTRACT of Supporting Evidence (for health dept. use)	DO NOT WRITE BELOW THIS LINE						
	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)						DATE ORIGINAL DOCUMENT WAS MADE
	1	application social security #249-32-2854, Baltimore, Md.					12-19-55
	2						
	3						
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
1	Clara Mamie						
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>Louis M. Byars Jr</i>		EVIDENCE REVIEWED BY <i>Mary Ann C. Malister</i>		DATE FILED <b>5-7-76</b>	