

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 LEWIS GRANVIL GALLMON			STATE FILE OR BIRTH NUMBER 139-22-002056	
	Month January	Day 12,	Year 1922	City or Town Newberry, S.C.	County S.C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE
	Child's name		Louis D. Gallman		LEWIS GRANVIL GALLMAN
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT <i>Lewis Donald Gallmon</i>			RELATIONSHIP <u>SELF</u>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>March 21 1979</i>		SIGNATURE OF NOTARY <i>Elaine J. Hamilton</i>		NOTARY COMMISSION EXPIRES <i>12/4 1979</i>
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	Soc. Sec. Appl. #249-34-0205	Baltimore, Md. 2-14-48
	2		
	3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
1	LEWIS GRANVIL GALLMON		DOB JAN. 12, 1922
2			
3			

DHEC No. 613 Rev. 2/75

0182

ADDITIONAL INFORMATION Evidence used to correct given name only.		EVIDENCE REVIEWED BY <i>Susan R. Self</i>	DATE FILED 3-29-79
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. Byars</i>	