

AFFIDAVIT OF CORRECTION TO BIRTH RECORD
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Page 2 of 2

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH			STATE FILE OR BIRTH NUMBER	
	LEWIS GRANVIL GALLMON			139-22-002056	
	Month	Day	Year	City or Town	County State
	BIRTH DATE	January 12, 1922		BIRTH PLACE	Newberry, 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 REGISTRANT		RELATIONSHIP
	<i>Levin Granvil Gallmon</i>		SELF

NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES
	<i>March 21 1979</i>	<i>Levin D. Hamilton</i>	12/4 1979

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	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES
	19		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		

ABSTRACT of Supporting Evidence (for health dept. use)	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

ADDITIONAL INFORMATION

Evidence used to correct given name only.

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	EVIDENCE REVIEWED BY	DATE FILED
	<i>Doris M. Byars</i>	<i>Susan R. Self</i>	3-29-79

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