

**AFFIDAVIT OF CORRECTION TO BIRTH RECORD** Page 2 of 2  
**SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL** May 31 1916

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	<b>REGISTRANT'S FULL NAME AT BIRTH</b> Laurie Matthew Lloyd						<b>STATE FILE OR BIRTH NUMBER</b> 139 16 059617	
	Month BIRTH DATE	Day May	Year 1916	City or Town Lamar	County Darlington	State SC		

<b>ITEMS TO BE AMENDED OR CORRECTED</b>	<b>ITEM OMITTED OR IN ERROR</b>	<b>BIRTH CERTIFICATE SHOWS</b>	<b>SHOULD BE</b>
	Given name of child	Archibald	Laurie Matthew Lloyd

<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Laurie Matthew Lloyd</i>	RELATIONSHIP self
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<b>NOTARY (AFFIX SEAL)</b>	SUBSCRIBED AND SWORN TO BEFORE ME ON February 21 19 78	SIGNATURE OF NOTARY <i>Doris M. Byars</i>	NOTARY COMMISSION EXPIRES July 7 19 80
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<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)	RELATIONSHIP
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<b>NOTARY (AFFIX SEAL)</b>	SUBSCRIBED AND SWORN TO BEFORE ME ON 19	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES 19
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**DO NOT WRITE BELOW THIS LINE**

<b>ABSTRACT of Supporting Evidence (for health dept. use)</b>	<b>NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)</b>		<b>DATE ORIGINAL DOCUMENT WAS MADE</b>
	1	Dr C E Aimar office record, Darlington SC	1960
	2		
	3		

<b>ADDITIONAL INFORMATION</b>	<b>INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE</b>		
	1	Laurie Matthew Lloyd (DOB May 26 1916)	
	2		
	3		

DHEC No. 613

Rev. 2/75

*1088*

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>	EVIDENCE REVIEWED BY <i>Doris M. Byars</i>	DATE FILED 3-14-78
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