

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 Norma Brown			STATE FILE OR BIRTH NUMBER 139-23- 049084	
	BIRTH DATE Month Day Year April 3 1923	BIRTH PLACE City or Town Lexington	County State S.C.		
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE
	Date of birth		April 10, 1924		April 3, 1923
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Norma B. Bryant</i>			RELATIONSHIP Self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>June 17 1985</i>		SIGNATURE OF NOTARY <i>Marvin P. Caneel</i>		NOTARY COMMISSION EXPIRES <i>Oct 27 1986</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	Connie Maxwell Orphanage Home Admission Rec. Greenwood, S.C.	May 17, 1934
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	April 3, 1923-Norma Brown	
2		
3		

DHEC No. 613
Rev. 2/75

ADDITIONAL INFORMATION
April 1, 1930 Census Report # 3 019889 Wash. D.C. age 6-Norma Brown

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>Ann. H. Owens</i>	EVIDENCE REVIEWED BY <i>Helen P. Blackwood</i>	DATE FILED <i>6-19-85</i>

0429