

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

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Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH Gladys McDowell				STATE FILE OR BIRTH NUMBER 139-23-048084			
	BIRTH DATE	Month Jan	Day 28	Year 1923	BIRTH PLACE	City or Town Sumter	County SC	State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS			SHOULD BE		
	Child's given name		Ollar Circle			Gladys McDowell		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>[Signature]</i>					RELATIONSHIP Self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>October 6th 1982</i>			SIGNATURE OF NOTARY <i>[Signature]</i>		NOTARY COMMISSION EXPIRES <i>July 1 1984</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	Own Marriage License no # Montgomery Co MD	Nov 18 1942
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	Gladys McDowell age 19	
2		
3		

DHEC No. 613

Rev. 2/75  
*[Signature]*

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>[Signature]</i>	EVIDENCE REVIEWED BY <i>[Signature]</i>	DATE FILED <i>10/14/82</i>