

# 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		STATE FILE OR BIRTH NUMBER		
	JULIA MARGARET LEVER		139-16-073809		
	BIRTH DATE	Month      Day      Year	BIRTH PLACE	City or Town      County      State	
	August	8,      1916	Lexington	South Carolina	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		
	given name		Julia Margrett		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:			RELATIONSHIP	
	SIGNATURE OF PARENT (OR OTHER) <i>Martha Willingham Lever</i>			<i>Mother</i>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON		SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES	
	<i>January 31      1975</i>		<i>Kathleen C. Leford</i>	<i>July      1979</i>	
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 lic. (no#) filed in Laurens Co., S.C.			11-7-34
	2				
	3				
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
	1	MARGARET			
	2				
	3				
ADDITIONAL INFORMATION					
DHEC No. 613 Rev. 11/73					
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	
		<i>Noris M. Bryan (jr)</i>		<i>Julia W. Davis</i>	
				DATE FILED	
				<i>2-6-75</i>	