

**AFFIDAVIT OF CORRECTION TO BIRTH RECORD**

filed 1-26-22

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 <b>ALTA ULATHA GODWIN</b>			STATE FILE OR BIRTH NUMBER <b>139-22-001271</b>		
	BIRTH DATE	Month <b>Jan.</b>	Day <b>23</b>	Year <b>1922</b>	BIRTH PLACE	City or Town <b>Florence</b>
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE
	Given name			Alta		Alta Ulatha Godwin
	Date of birth			Jan. 22, 1922		Jan. 23, 1922
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Alta G. Lewis</i>			RELATIONSHIP <b>Self</b>		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <b>September 22 19 78</b>			SIGNATURE OF NOTARY <i>Kae C Maurer</i>		NOTARY COMMISSION EXPIRES <b>January 20 19 87</b>
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 <b>19</b>			SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES <b>19</b>

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	Libery Life Ins. Pol. #2846091, Greenville, S. C.	Feb. 16, 1942
	2	Office patient record of Dr. W. Freeman Parker, Jr., Florence, SC	June 6, 1972
	3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
1	Alta Ulatha Godwin, Age 20		
2	Alta G. Lewis, date of birth Jan. 23, 1922		
3			

DHEC No. 613

Rev. 2/75

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>Doris M. Bryan GF</i>	EVIDENCE REVIEWED BY <i>Kae C Maurer</i>	DATE FILED <b>9-26-78</b>

*1938*