

15043

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 FRANCES LILLIAN PRATER				STATE FILE OR BIRTH NUMBER 139 22 003033	
	Month BIRTH DATE FEB	Day 2	Year 1922	City or Town Anderson	County S.C.	State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	given names omitted		unnamed		Frances Lillian Prater	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Frances L. Prater</i>				RELATIONSHIP self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON Oct. 17 19 79		SIGNATURE OF NOTARY <i>Frances L. Prater</i>		NOTARY COMMISSION EXPIRES March 8 1989	
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	Marriage License #660, Anderson S C				July 3 1942
	2					
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
	1	Frances Lillian Prater, age 20 yrs 5 months				
	2					
	3					
DHEC No. 613	ADDITIONAL INFORMATION					
Rev. 2/75	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 G. Owens</i>		EVIDENCE REVIEWED BY <i>Frances L. Prater</i>	
1795					DATE FILED 11-14-79	