

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			
	Christine Gray			139-16-064572			
BIRTH DATE	Month Jun	Day 22	Year 1916	BIRTH PLACE	City or Town Greenville	County Greenville	State S. C.

ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE
	child's given name	omitted	Christine

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Christine M. Brewer</i>	RELATIONSHIP self
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NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON Feb. 22, 1978	SIGNATURE OF NOTARY <i>Mary Louise C. McAlister</i>	NOTARY COMMISSION EXPIRES COMMISSION EXPIRES NOV. 23, 1980 19
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AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)	RELATIONSHIP
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NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON 19	SIGNATURE OF NOTARY	NOTARY COMMISSION EXPIRES 19
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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, Abbeville, S. C. (no #)	12-14-58
	2		
	3		

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	Christine Gray, age 42	
	2		
	3		

DHEC No. 613 Rev. 2/75 <i>1612</i>	ADDITIONAL INFORMATION	ASSISTANT STATE REGISTRAR <i>Doris M. [Signature]</i>	EVIDENCE REVIEWED BY <i>Mary Louise C. McAlister</i>	DATE FILED <i>4/6/78</i>
I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.				