

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

File Date Page 2 of 2

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH				STATE FILE OR BIRTH NUMBER				
	CORTEZ SMART				139-23-000118				
	BIRTH DATE	Month Jan	Day 04	Year 1923	BIRTH PLACE	City or Town Allendale	County Allendale	State S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Child's given name				Charlie , Jr.		Cortez Smart		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <u>Cortez Smart</u>				RELATIONSHIP self				
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <u>Dec. 11</u> 19 <u>78</u>				SIGNATURE OF NOTARY <u>Margie D. Thymek</u>		NOTARY COMMISSION EXPIRES <u>Oct. 22</u> 19 <u>81</u>		
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	U S discharge papers (Ft. McPhearson Ga.) #34 961 701						May 14 1946	
	2								
	3								
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
	1	Cortez Smart (Jan 04 1923)							
	2								
ADDITIONAL INFORMATION									
DHEC No. 613 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 <u>Doris M. Byars BE</u>			EVIDENCE REVIEWED BY <u>Carlette D. All</u>		DATE FILED <u>1-2-79</u>	

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