

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				
	Catherine Louise Barton			139-16-079935				
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month 0Ct.	Day 24	Year 1916	BIRTH PLACE	City or Town Aiken	County S.C.	State
	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Child's given name				Katherine Louise		Catherine Louise	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:						RELATIONSHIP	
	SIGNATURE OF PARENT (OR OTHER) <i>Catherine B. Jack</i>						self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON			SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES		
	2-18 1976			<i>Julia W. Davis</i>		10-13 1985		
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	Life and Casualty Ins. Co. #15341750, Nashville, Tenn.						8-7-44
	2							
	3							
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE							
	1	CATHERINE LOUISE						
	2							
	3							
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			EVIDENCE REVIEWED BY		DATE FILED
			<i>Doris M. Byars</i>			<i>Earl Bleakley</i>		2-18-76

DHEC No. 613

Rev. 11/73