

Pd. \$3.00 4/23/76bw

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 WILLIE THERO LAMBERT				STATE FILE OR BIRTH NUMBER 139-16-077119		
	BIRTH DATE	Month September	Day 3	Year 1916	BIRTH PLACE Georgetown	County Georgetown	
					State S. C.		
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE		
	Given Name		Thomas		Willie Thero Lambert		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Willie Thero Lambert</i>				RELATIONSHIP Self		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON APRIL 24 1976		SIGNATURE OF NOTARY <i>Patricia B. Rashed</i>		NOTARY COMMISSION EXPIRES MAR. 10 1980		
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	Liberty Life Ins. Co. issued in Greenville, S. C. Policy #622144					4/6/61
	2						
	3						
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
	1	Willie Thero Lambert					
	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>Deis M. Byars</i>		EVIDENCE REVIEWED BY <i>Belva O. Wingate</i>		
					DATE FILED 5-7-76		