

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 Barney Lee Chapman			STATE FILE OR BIRTH NUMBER 139 16 047134		
	BIRTH DATE	Month Jan	Day 17	Year 1916	CITY OR TOWN Pickens	COUNTY Pickens

ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE
	Given name	Barnie Lee	Barney Lee

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Barney Lee Chapman</i>	RELATIONSHIP self
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NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>February 27 1978</i>	SIGNATURE OF NOTARY <i>B. Cathy Budge</i>	NOTARY COMMISSION EXPIRES <i>April 16 1981</i>
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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 Passport State Dept. Washington, D.C. No: JO 18731	Jan 12 1968
	2	

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	1 Name: Barney Lee Chapman Date of Birth Jan 17 1916
	2
	3

DHEC No. 613

Rev. 2/75

1713

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 <i>Doris M Byars</i>	EVIDENCE REVIEWED BY <i>Edna S. Venable</i> Deputy County Registrar	DATE FILED 4-11-78