

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 Bernice Lawrence Campbell			STATE FILE OR BIRTH NUMBER 139-16-082762				
	BIRTH DATE	Month Oct	Day 13	Year 1916	BIRTH PLACE	City or Town Marlboro	County Marlboro	State S.C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS			SHOULD BE	
	Child's name			Unnamed Campbell			Bernice Lawrence Campbell	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Bernice Lawrence Campbell</i>						NOTARY PUBLIC STATE OF FLORIDA AT LARGE MY COMMISSION EXPIRES DEC. 8 1980 DO NOT WRITE IN UNWRITEN RELATIONSHIP	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>November 12 1978</i>		SIGNATURE OF NOTARY <i>Patricia H. Longm</i>		NOTARY COMMISSION EXPIRES <i>December 8 1980</i>			
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	US Marine Corps Discharge # 246596 Camp Lejeune, NC	Jan 10, 1946	
	2			
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
	1	Bernice Lawrence Campbell (DOB Oct 13, 1916)		
	2			
3				
DHEC No. 613 Rev. 2/75	ADDITIONAL INFORMATION			
1383	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 SR</i>	EVIDENCE REVIEWED BY <i>Barbara H. Robbrough</i>	DATE FILED 11-24-78