

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH THOMAS RAYMOND BURDETTE			STATE FILE OR BIRTH NUMBER 139 22 000148		
	Month Jan	Day 9	Year 1922	City or Town Anderson	County	State S. C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		
	given name in error			WM		
	surname in error			Burdett		
				Burdette		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Thomas Raymond Burdette</i>					RELATIONSHIP
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>October 10 1979</i>			SIGNATURE OF NOTARY <i>Sybil B. Lytle</i>		NOTARY PUBLIC STATE OF SOUTH CAROLINA My Commission Expires Feb. 5, 1981 19
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	Life of Virginia Ins. Co. Policy #293396 Richmond, Virginia	Sep 29 1973
	2	Sibling's Birth Records #139 25 013716, 139 27 000122, Columbia, S.C.	May 30 1925
	3		Jan 3 1927
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
1	Thomas Raymond Burdette birthdate Jan 9 1922		
2	Burdette		
3			

DHEC No. 613 Rev. 2/75

1158

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>Ann S. Owens</i>	EVIDENCE REVIEWED BY <i>Ann Oakley</i>	DATE FILED <i>10/10/79</i>
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