

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	
	RUBY IRENE HOLDEN				139 16 065908	
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month Jun	Day 20	Year 1916	BIRTH PLACE	City or Town Pickens
					County	State S.C.
	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS	
	Given name				N. Ruby Irene	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Mrs. Ruby Irene H. Turnblin</i>				RELATIONSHIP self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON May 17 19 76 <i>Edna A. Venable</i>				NOTARY COMMISSION EXPIRES Dec 12 19 83	

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	Own marriage license #900 Greenville County, S.C.	May 2, 1967
	2		
	3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
1	Name: Ruby Irene Holden		
2			
3			

DHEC No. 613

Rev. 11/73

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>Deris M. Byars</i>	EVIDENCE REVIEWED BY <i>Edna A. Venable</i> <i>Deputy County Registrar</i>	DATE FILED 5-24-76