

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

D.O.F. 1-22-22

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Page 2 of 2

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH			STATE FILE OR BIRTH NUMBER		
	Iona Violet Barnhill			139-22 001617		
	Month	Day	Year	City or Town	County	State
	BIRTH DATE	January	9	1922	Horry	S. C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Child's given name		Jana Violet		Iona Violet Barnhill	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)				RELATIONSHIP	
	<i>Iona Violet Barnhill Alford</i>				Self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES	
	<i>May 4</i> 19 <i>83</i>		<i>Ladine Tucker</i>		<i>Sept 7</i> 19 <i>89</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		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES	

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	Social Security Appl. # 248-56-3199 Baltimore MD	Jan 1953
	2		
	3		
	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
	1	Iona Violet(Alford) dob 1-9-22	
	2		
	3		
DHEC No. 613 Rev. 2/75	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>Ann L. Clevens</i>	EVIDENCE REVIEWED BY <i>Melissa B. Baldwin</i>
<i>0895</i>			DATE FILED <i>5-6-83</i>