

AFFIDAVIT OF CORRECTION TO BIRTH RECORD
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Page 2 of 8

Enter Correct Information Concerning Person Whose Birth Record Is Being Amended	REGISTRANT'S FULL NAME AT BIRTH INEZ POSEY			STATE FILE OR BIRTH NUMBER 139-16-086814	
	BIRTH DATE Month Day Year Nov. 4, 1916	BIRTH PLACE Oconee Co. S.C.		City or Town	County State
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS		SHOULD BE	
	<i>Spelling of surname</i>	<i>Paney</i>		<i>POSEY</i>	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Inez P. Smith</i>			RELATIONSHIP <i>Self</i>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>10-11 19 78</i>		SIGNATURE OF NOTARY <i>Licki D. Smalley</i>		NOTARY COMMISSION EXPIRES <i>June 19 19 83</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	<i>Census Record lb 4-071-226 Washington, D.C.</i>	<i>1-1-20</i>
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	<i>Child Inez Posey in the family of John T. and Idell Posey, age 3²/12 yrs old.</i>	
2		
3		

DHEC No. 613

Rev. 2/75

0383

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>Licki D. Smalley</i>
		DATE FILED <i>10/16/78</i>