

**AFFIDAVIT OF CORRECTION TO BIRTH RECORD**  
**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	
	MIKE H HIX				139-16-078478	
	Month	Day	Year	City or Town	County	State
BIRTH DATE	Sep	10	1916	BIRTH PLACE	Oconee	S. C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS		SHOULD BE
	GIVEN NAME			MIKE LEE		MIKE H
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Mike H. Hix</i>				RELATIONSHIP Self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>March 10</i> 19 <i>78</i>		SIGNATURE OF NOTARY <i>Jennifer F. Underwood</i>		NOTARY COMMISSION EXPIRES <i>Nov. 16</i> 19 <i>87</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 Military Discharge Papers #34 096 218 Fort Bragg, N. C.	Sep 26 1945
2		
3		

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE

1	MIKE H. HIX D/B Sep 10, 1916
2	
3	

DHEC No. 613

Rev. 2/75

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

*Doris M. Byars*

EVIDENCE REVIEWED BY

*Jennifer Underwood*

DATE FILED

*3/20/78*

*1317*