

**F 12-17-1916 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	<b>REGISTRANT'S FULL NAME AT BIRTH</b> Mattie Mozelle Simmons		<b>STATE FILE OR BIRTH NUMBER</b> 139 16 087990	
	Month      Day      Year <b>BIRTH DATE</b> Dec    16    1916	City or Town <b>BIRTH PLACE</b> Abbeville	County S.C.	State
<b>ITEMS TO BE AMENDED OR CORRECTED</b>	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS	
	given name in error		Olinda	
<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Mozelle S. Lynner</i>		RELATIONSHIP self	
<b>NOTARY (AFFIX SEAL)</b>	SUBSCRIBED AND SWORN TO BEFORE ME ON November 10 19 78 <i>Francis Fuller</i>		SIGNATURE OF NOTARY July 29, 19 79	
<b>AFFIDAVIT</b>	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)		RELATIONSHIP	
<b>NOTARY (AFFIX SEAL)</b>	SUBSCRIBED AND SWORN TO BEFORE ME ON 19		SIGNATURE OF NOTARY NOTARY COMMISSION EXPIRES 19	
<b>DO NOT WRITE BELOW THIS LINE</b>				
<b>ABSTRACT of Supporting Evidence (for health dept. use)</b>	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)			DATE ORIGINAL DOCUMENT WAS MADE
	1 Child's Birth Record #139 35 005171, Columbia, S.C.			Mar 27 1935
	2			
	3			
<b>INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE</b>				
1 Mattie Mozelle Simmons, age 18 yrs.				
2				
3				
<b>ADDITIONAL INFORMATION</b>				
DHEC No. 613 Rev. 2/75  <i>1140</i>		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>Francis Fuller, Co. Registrar II</i>  DATE FILED <i>11-13-78</i>