

**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 Hollie Birch Chestnut			STATE FILE OR BIRTH NUMBER 139-16-056271		
	Month BIRTH DATE April	Day 19	Year 1916	CITY OR TOWN BIRTH PLACE Horry	County S.C.	State

ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR	BIRTH CERTIFICATE SHOWS	SHOULD BE
	Child's name	Halley Birch Chestnut	Hollie Birch Chestnut

AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER)	<i>Hollie Birch Chestnut</i>	RELATIONSHIP self
-----------	--	------------------------------	----------------------

NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON 22 August 1977	SIGNATURE OF NOTARY <i>Kennie Todd</i>	NOTARY COMMISSION EXPIRES 9-8-1979
---------------------	--	---	---------------------------------------

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 Own Social Security Appl.; Baltimore, Md. #249-24-1870	11-1-1940
	2	

DHEC No. 613 Rev. 2/75 1202	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE	
	1 Hollie Birch Chestnut	DOB: Apr 19 1916
	2	

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. Bays</i>	EVIDENCE REVIEWED BY <i>Mary Drake</i>	DATE FILED 3/17/78