

**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 <b>PASKEL P PYE</b>			STATE FILE OR BIRTH NUMBER <b>139-22-000921</b>		
	BIRTH DATE Month Day Year <b>Jan 21 1922</b>	BIRTH PLACE City or Town County State <b>Colleton Co., S.C.</b>				
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given name		Unnamed Male		PASKEL P PYE	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Paskel P Pye</i>			RELATIONSHIP <b>Self</b>		
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <b>Jan 06 1984</b> 19		SIGNATURE OF NOTARY <i>Josephine A Hudson</i>		NOTARY COMMISSION EXPIRES <b>Nov 13 1989</b> 19	
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	<b>U.S. Army Bomb Vault Pass No 38</b>	<b>Ardmore Oklahoma</b>	<b>Jun 23 1944</b>
2			
3			
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE			
1	<b>Paskel P Pye</b>	<b>22</b>	
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

*Ann D. Owens HP*

EVIDENCE REVIEWED BY

*Josephine A Hudson*

DATE FILED

**1-11-84**

*0578*