

**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>Boykin Lisenby</b>		STATE FILE OR BIRTH NUMBER <b>139-16-080866</b>		
	Month <b>October</b>	Day <b>2</b>	Year <b>1916</b>	City or Town <b>Chesterfield</b>	County <b>S.C.</b>
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE
	Child's Given Name		Un-Named Lisenby		Boykin Lisenby
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Boykin Lisenby</i>			RELATIONSHIP <b>Self</b>	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>10-4</i> 19 <i>78</i>		SIGNATURE OF NOTARY <i>W. L. Davis</i>	NOTARY COMMISSION EXPIRES <b>5-5-87</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	
<b>DO NOT WRITE BELOW THIS LINE</b>					
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	Appl. Soc. Sec. Acct. #249 32 1203, Baltimore, Maryland			11/1942
	2				
	3				
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE					
1	BOYKIN LISENBY-(DOB-10/02/1916)				
2					
3					
DHEC No. 613					
Rev. 2/75					
1311					
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. Byason</i>	EVIDENCE REVIEWED BY <i>Senal R. Brooks</i>	DATE FILED <b>11.20.78</b>	