

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	REGISTRANT'S FULL NAME AT BIRTH Thelma Pearl Graham			STATE FILE OR BIRTH NUMBER 139-22-000877		
	BIRTH DATE Month Day Year Jan 01 1922	BIRTH PLACE City or Town Clarendon	County S.C.		State S.C.	
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR		BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given name of child		Pearl		Thelma Pearl Graham	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Thelma Montgomery</i>				RELATIONSHIP Self	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON <i>March 10 1992</i>		SIGNATURE OF NOTARY <i>Carolyn P. Stewart</i>		NOTARY COMMISSION EXPIRES <i>June 26 1999</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		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES	

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	So. Sec Application Record, Baltimore, Md	08-XX-86
2		
3		
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE		
1	Thelma (Montgomery) date of birth 01-01-22	
2		
3		

DHEC No. 613

Rev. 2/75

0794

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>Murray B. Hudson</i>	EVIDENCE REVIEWED BY <i>Carolyn P. Stewart</i>	DATE FILED 3-19-92