

4902

Please Note: Document(s) Repeated Intentionally

ARIZONA STATE DEPARTMENT OF HEALTH DIVISION OF VITAL STATISTICS AFFIDAVIT TO CORRECT A RECORD

Identifying information about the registrant as it appears on the original record:

Name of Registrant Chas. Carnes B. File No. 91
 Date { Birth Oct. 1, 1912 D. Place Gila Globe
~~DEATH~~ Mo. Day Year County City

E. Item on Certificate	F. The following facts are incorrectly stated on original record:	G. The facts should be stated as follows to be correct:
Child's name:	Chas. Carnes	Harold M. Carnes
Twin Triplet or Other	Twin	Single birth
Date of birth:	October 1, 1912	October 2, 1912
Father's name:	C. J. Carnes	Clarence Jasper Carnes

STATE OF Missouri } I, the affiant, related as Mother to the
 COUNTY OF Jasper } ss. person named on line A of this document, do solemnly swear that to the best of my
 knowledge such corrections, as shown, are necessary to make this record correct.

AFFIANT'S SIGNATURE Blondina B. Carnes
 AFFIANT'S ADDRESS Alba, Missouri Box 135

(SEAL)

Subscribed and sworn to before me this 1 day of May, 1952

Notary Public Charles E. Scafe

My Commission Expires December 22, 1954 Address Neck City, Mo.

STATE OF Missouri } I, the affiant, related as Second Cousin to the
 COUNTY OF Jasper } ss. person named on line A of this document, do solemnly swear that to the best of my
 knowledge such corrections, as shown, are necessary to make this record correct.

AFFIANT'S SIGNATURE Jerry E. Smith
 AFFIANT'S ADDRESS Alba, Missouri.

(SEAL)

Subscribed and sworn to before me this 1 day of May, 1952

Notary Public Charles E. Scafe

832-1002-328

My Commission Expires December 22, 1954 Address Neck City, Missouri
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