

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

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

A. Name of Registrant Mary Margaret Looney B. File No. 134
 C. Date { Birth Aug. 7, 1930 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:
1	Date of birth:	August 7, 1930	August 17, 1930
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Mary Margaret Looney NF

STATE OF _____ } ss. I, the affiant, related as mother to the 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 Mrs. Margaret Looney
 AFFIANT'S ADDRESS Rt #3 Cedar Rapids Iowa
 (SEAL) Subscribed and sworn to before me this 30 day of August 1951
 Notary Public Edward Jasper
 My Commission Expires _____ MY COMMISSION EXPIRES JULY 4, 1954 Address _____

STATE OF _____ } ss. I, the affiant, related as unt to the 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 Mrs. Louise J. Sena
 AFFIANT'S ADDRESS Rt #3 - Cedar Rapids, Iowa
 (SEAL) Subscribed and sworn to before me this 30 day of August 1951
 Notary Public Edward Jasper
438-817-425 MY COMMISSION EXPIRES JULY 4, 1954 Address _____
 My Commission Expires _____