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

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

e of Registrant Juan Miguel Guadiana B. File No 116

e { Birth / Death May (Mo.) 13 (Day) 1931 (Year) D. Place Gila (County) Miami (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:
Father's birthplace	Morenci, Arizona	Juchipila, Zac. Mexico
Father's age	23 years	26 years

TATE OF _____ } ss.
OUNTY OF _____

I, the affiant, related as Grandmother 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 Atanacia Medrano López

AFFIANT'S ADDRESS Rancho "El Ranchito" Juchipila, Zac. México.

(SEAL)

Subscribed and sworn to before me this 6 day of Julio 1956.

Notary Public Lic. José Reynoso Ponce.

My Commission Expires _____ Address _____

TATE OF Arizona } ss.
OUNTY OF Gila

I, the affiant related as father 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 Austio M. Guadiana

AFFIANT'S ADDRESS 1015 Depot Hill Miami Ariz.

(SEAL)

Subscribed and sworn to before me this 11th day of July 1956

171-513-199 Notary Public [illegible]

My Commission Expires 1-24-59 Address Miami, Ariz.

VS 24 REV. 10-51