STATE OF ARIZONA
ARIZONA DEPARTMENT OF HEALTH SERVICES
Office of Vital Records

STATE FILE NO. 94

# AMENDMENT TO VITAL RECORD

**IDENTIFICATION OF REGISTRANT AND EVENT**

| NAME OF REGISTRANT | A. FIRST | B. MIDDLE | C. LAST | DATE OF EVENT (MONTH DAY YEAR) | ☒ BIRTH ☐ DEATH |
|---|---|---|---|---|---|
| 1. | MATILDA | ISABEL | PEREZ | 2. JULY 08, 1933 | |

| PLACE OF EVENT | A. INSTITUTION OR STREET ADDRESS | B. TOWN OR CITY | C. COUNTY | D. STATE |
|---|---|---|---|---|
| 3. | K 34 LIVE OAK LANE | MIAMI | GILA | ARIZONA |

**DATA TO BE CHANGED (ITEM 4)**

| | A. ITEM NO. AND IDENTIFICATION | B. ITEM APPEARS BEFORE AMENDMENT | C. ITEM APPEARS AFTER AMENDMENT |
|---|---|---|---|
| 1 | 2. FULL NAME OF CHILD | ISABELLE FELIX | MATILDA ISABEL PEREZ |
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**ABSTRACT OF DOCUMENTARY EVIDENCE (ITEM 5)**

1. TYPE OF DOCUMENT: REQUEST FOR NAME CHANGE SIGNED BY REGISTRANT — DATE ESTABLISHED: AUG 06, 1987
   SUPPORTS THE FOLLOWING CLAIMS:
   SUPPORTS CLAIM IN COLUMN C.
2. TYPE OF DOCUMENT: COURT ORDER NAME CHANGE #CV 87-16708 FROM THE SUPERIOR COURT, MARICOPA COUNTY, ARIZONA — DATE ESTABLISHED: JUL 24, 1987
   SUPPORTS THE FOLLOWING CLAIMS:
   SUPPORTS CLAIM IN COLUMN C.
3. TYPE OF DOCUMENT: — DATE ESTABLISHED:
   SUPPORTS THE FOLLOWING CLAIMS:

**FOR STATE REGISTRAR USE ONLY**

SUPPLEMENTARY ENTRIES
6.

**STATE REGISTRAR'S CERTIFICATION**

7. The vital record identified above has been amended according to the laws of this state and regulations of the Arizona Department of Health Services. Documentary evidence has been reviewed which substantiates the changes set forth.

| DATE AMENDED | AMENDMENT NO. | REGISTRAR'S SIGNATURE | TITLE |
|---|---|---|---|
| 8. AUG 19, 1987 | 9. A87-514 | 10A. Nancy M Lovell | 10B. ASSISTANT STATE REGISTRAR |