

Damaged Document(s)

Arizona State Department of Health DIVISION OF VITAL STATISTICS

State File No. 169

State of Ariz }
County of Gila } SS. Augustine Laguna of 923 Sullivan St. Miami, Ariz
(Name of Affiant) (Address)

being first duly sworn, deposes and says that he/she is Father
(If related specify degree—If friend or otherwise, so state)

of Maria Luna who was born UNKNOWN in the City of Miami

County of Gila on July 28, 1924
(Month) (Day) (Year)

as stated in a certificate of birth/~~death~~ filed by Cyril M. Cron, M. D.
(Give name of physician ~~and address~~ for birth ~~and date~~)

with the Local Registrar for Miami, Arizona, on Aug. 31, 1924
(Date)

That the following facts set forth in said certificate are not correctly stated therein, to-wit:

Child's name: Maria Luna
Father's name: Jesus Luna
Mother's name: Maria Felez

That affiant upon his/her own knowledge states the true facts to be, and the changes necessary to make the record correct are, as follows:

Child's name: Maria Felix Laguna
Father's name: Augustine Laguna
Mother's name: Maria Felix

(Affiant) Cyril M. Cron M.D.
(Address) 304 Pine Oak Street Miami Arizona

Subscribed and sworn to before me this 9th day of Sept, 1928

State of Arizona }
County of Gila } SS. Notary Public John Carpenter
My Commission expires 9-27-50 Address Miami Ariz

Augustine Laguna of Miami Arizona
(Name of Affiant) (Address)

Arizona, being first duly sworn, deposes and says that he/she has knowledge of the facts hereinbefore alleged and that the said facts as stated therein are true.

(Affiant) Augustine Laguna John Carpenter
(Address) Mark WITNESS

431-728-467

Subscribed and sworn to before me this 9th day of September, 1948
(If related specify degree—If friend or otherwise, so state)

Form V. S. 1
10 Notary Public John Carpenter
My Commission expires 9-27-50

36577

Maria Felix Laguna