Person Filing: (1)	
Address (if not protected):	
City, State, Zip Code:	
Telephone:	FOR CLERK'S USE ONLY
Email Address:	FOR CLERK'S USE ONLY
Lawyer's Bar Number:	
Representing 🔲 Self, without a Lawyer or 🔲 Attorney for 🦳 Petitioner OR 🥅 R	espondent
representing cent, without a Lawyer of Attorney for I entironer on IV	espondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

(2) In the Matter of		Case No.		
(Name of person for wh	om birth certificate is requested)	PETITION FOR (ESTABLISH DEI CERTIFICATE A.R.S. § 36-333		гн
· -	ourt on my own behalf, or a ate Registrar (Office of Vital	 -	_	·
or the person nam	ed below,			
4) First Name: Middle Name: Last Name:				
Date of Birth:	Month	Date	Year	
Place of Birth:	City (if applicable)	/ County		, ARIZONA

(5) STATEMENTS TO THE COURT: ALL of the following are true statements:

- The person for whom the delayed birth certificate is requested was born in the state of Arizona.
- The person's birth is not registered in another state or country.
- No record of the person's birth can be found in this State's Vital Records.
- Despite diligent efforts, the Petitioner was unable to obtain the information and evidentiary documents required for the creation and registration of a delayed birth certificate.

Case No.	
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• The State Registrar has refused to create and register a delayed birth certificate and the letter of denial received from the State Office of Vital Records is filed with this petition.

(6) OATH OR AFFIRMATION

(notary seal)

I swear or affirm under penalty of perjury that the contents of this document are true and correct.

Date

Signature

STATE OF ______

COUNTY OF ______

Subscribed and sworn to or affirmed before me this: _______ by

Deputy Clerk or Notary Public