ATTO	ORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address):	FOR COURT USE ONLY
TELE	EPHONE NO.:	
EMA	IL ADDRESS:	
ATTO	ORNEY FOR:	
180 I	ERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN East Weber Avenue, Suite #413 kton, CA 95202	
IN TI	HE MATTER OF THE PETITION OF:	
	PETITION TO OBTAIN ORIGINAL UNSEALED AND UNREDACTED BIRTH CERTIFICATE	CASE NUMBER:
	quest a copy of original birth certificate, complete this form and attach a cop	
I,	, am the Petitioner	in the above-entitled matter and declare as
follov	NS:	
1.	My permanent residence address is:	,
	in the City of, County of	
2.	a. I am the adoptee.	, , , , , , , , , , , , , , , , ,
	b. I am related to the adoptee as	onship to adoptee)
3.	San Joaquin County is the residence of the adoptee O	R the county wherein the Order of
	Adoption was granted.	
4.	The adoptee's date of birth is and place of birth is (<i>city, state</i>)	
	(day, monin, year)	
5.	I the adoptee was adopted by	
	I the adoptee was adopted by	
	on or about, in the City of	, county of,
	State of	
6		ainth anytificate of the named adopted for the
6.	I respectfully request permission to obtain a copy of the original birth certificate of the named adoptee for the	
	following reasons (set forth good and compelling reasons or good cause approaching the necessitous):	
	See attachment #6, attached hereto.	

SJ-FL-006 (Optional) (Revised 3/28/22) 7. Attached is the VS-111 and a check made payable to CDPH Vital Records.

VERIFICATION

I am the Petitioner in the above matter. I have read the foregoing Petition and know the contents thereof. I declare that the same is true of my own knowledge, except as to those matters which are therein stated upon my information and believe, and as to those matters I believe them to be true.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____, at _____

(city, state)

(Print Name of Petitioner)

(Signature of Petitioner)