	CIVIL ACTION FILE NO.		
In re the Name Change of: Petitioner) Petitioner			
	PETITION TO CHANGE NAME OF ADULT		
1.	The Petitioner's name is, and he/she is a resident of Richmond County, Georgia. Jurisdiction and venue are proper in this court.		
2.	2. The Petitioner's residential address and telephone number is (provide street, city, zip code, and current telephone number):		
3.	The petitioner was born on (insert date) and was born: [REQUIRED Check and complete ONE of the following] [County: State of Insert date]		
	☐ In County, State of, U.S.A. ☐ Outside the United States, in		
4.	The Petitioner wants to change his/her name fromto		
5.	5. The reasons for this name change are as follows:		
6.	The Petitioner certifies that he/she does not intend to use this name change to fraudulently deprive anyone of any right under the law.		
	EFORE, the Petitioner asks that the Petitioner's name be changed as provided in uph 4 above.		
DATE	PETITIONER [Signature]		

CIVIL ACTION FILE NO. In re the Name Change of: Petitioner VERIFICATION OF PETITION TO CHANGE NAME OF ADULT The Petitioner, ______, personally appeared before the undersigned officer, duly authorized to administer oaths. After being sworn by said officer, the petitioner attests that all matters stated in the attached Petition to Change Name of Adult are true and correct. PETITIONER [Signature] DATE Subscribed and sworn before me, this

SUPERIOR COURT OF RICHMOND COUNTY, GEORGIA

Notary Public

SUPERIOR COURT OF I	RICHMOND COUNTY, GEORGIA
CIVIL ACTION FILE NO)
In re the Name Change of:	
Petitioner	3
NOTICE OF PETITION	TO CHANGE NAME OF ADULT
Notice is hereby given that	, the
undersigned, filed his/her Petition to Ch	nange Name of Adult to the Superior Court of
Richmond County on the, day	of,, praying for
change in the name of Petitioner from _	, to
Notice is hereby given pursuant t	to law to any interested or affected party to
appear in said Court and to file objection	ns to such name change. Objections must be file
with said Court within 30 days of the fili	ing of said petition.
	9 9
Dated:	
	PETITIONER, Pro Se [Signature]
	Petitioner's Name [Print]:Address:

Telephone Number: