Petitioners seeking to change their name or their child's name should only use this packet if:

- You are not incarcerated.
- You are over the age of 18 and have been a resident of Monroe County, WV for more than (1) one year prior to filing this petition.. OR
 - You are a non-resident of Monroe County, WV but were born in and previously were a resident of Monroe County, WV for at least 15 years.
- You are not a registered sex offender pursuant to any state or federal law.
- You are not seeking this name change for any improper or illegal purpose.
- You are not a convicted felon in any jurisdiction.
- You are not attempting to avoid any state or federal law regarding identity.
- This name change is not for purposes of avoiding debt or creditors.

All forms in this packet must be completed.

- Type or print neatly in blue or black ink in the blanks provided. Do not print on the back or sides of the forms.
- File the original petition in the Circuit Clerk's office. The circuit clerk's office may notarize your form if you provide proper identification.
- Filing Fee for Name change proceeding is \$200 to be paid at time of filing. Fee
 waiver applications are available in the circuit clerk's office.
- Petitioner must also pay the cost of publication directly to the Monroe Watchman before publication.
- The completed Notice of Name Change must be published in the Monroe Watchman one time at least 10 days before the hearing date.
- You must file the Certificate of Publication received from the Monroe Watchman with the circuit clerk's office before your hearing.
- At your hearing you should be prepared to explain to the court the reason you are seeking a name change and to verify the facts in your petition.
- If your name change is granted it is your responsibility to inform government agencies, employers, creditors, and all other interested agencies and businesses of your new name.
- The court nor the circuit clerk's office notifies anyone of your name change.
- You will be provided one certified copy of your name change order, you may obtain additional copies from the circuit clerk's office for \$1 per page.

IN THE CIRCUIT COURT OF MONROE COUNTY, WEST VIRGINIA

N RE: Petition of:	<u> </u>
On behalf of (If change of name of Minor Child)	
For change of name to:	7. 10
PETITION	
Comes now the Petitioner and petitions this Court to change the	Petitioner or the
Petitioner's child or ward's name from	to
In support of this Petition, the Petitioner states as follows	
Ť.	
He/She is currently over under the age of eightee	n (18) years, having been
born on/, in	_county
IL.	
Petitioner has been a bona fide resident of Monroe Count one (1) year prior to filing of this petition.	y, West Virginia for at least
OR	
Petitioner is a nonresident of Monroe County, West Virgi married in this county or was previously a resident of this county years.	nia but was born or ty for at least fifteen (15)

111.

The name change is not for the purposes of avoiding debt or creditors.

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Petitioner is not a registered sex offender pursuant to any state or federal law.

V.

This name change is not for the purpose of avoiding any state or federal law regarding identity.

VI.

This name change is not sought for any improper or illegal purpose.

VII.

The Petitioner is not a convicted felon in any jurisdiction.

VIII.
Petitioner or the Petitioner's child or ward has been known as
nd the change of name is requested for the following reasons:
Petitioner is a divorced woman who wishes to restore her maiden name. Other Reason:
United Reason.
WHEREFORE, your Petitioner prays that the Court declare that he/she shall
enceforth be known asand for such other and
urther relief as this Court may deem just and proper.

PETITIONER Pro Se

VERIFICATION

COUNTY OF MONROE, TO-WIT:	
the	Petitioner named in the attached Petition, being first
	egations contained in the said Petition are true; If to be upon information and belief, he/she believes
	PETITIONER
	Pro Se
Taken, subscribed and sworn t	o before me, the undersigned authority, this
day of, 20	
My commission expires:	
	NOTADY DUBI IC

WV DHHR - VITAL REGISTRATION OFFICE AFFIDAVIT TO CORRECT WEST VIRGINIA BIRTH CERTIFICATE INFORMATION AS IT APPEARS ON THE ORIGINAL BIRTH CERTIFICATE:

Name as recorded:	
Date of birth:	
City & County of birth: City	County:
Mother's maiden name:	
	BE CORRECTED OR ADDED:
	DE COMMETED ON ADDED.
	Should Read
CERTIFICATE IS TO BE CORRE	S TO BE SIGNED BY THE PERSON WHOSE BIRTH SCTED (OR BY PARENT IF UNDER 18):
and residing at	(Early Daily
	best of my knowledge, the foregoing facts are true and
Signature;	
Date Signed:	
Signature of NOTARY PUBLIC:	
	Commission expires:
	Submit to:
	ATTN: Corrections Unit Vital Registration Office PO Box 11012
Notary Stamp or Seal	Charleston, WV 25339-1012 Revised 07.31.2002