

DISTRICT COURT OF THE STATE OF WASHINGTON
FOR WHATCOM COUNTY, LYNDEN, Washington

In Re the Matter of:)

CHAVEZ, MARIA ANN)

) Cause Number: _____

) Petition for Change of Name
)
)

Petitioner.

1. I am applying for a court order which will change:

My name from (Current full name) MARIA ANN CHAVEZ
First Middle Last
To (New Name Desired) MARCO ANDRE CHAVEZ
First Middle Last

The name of my child or ward from _____
First Middle Last
To (New Name Desired) _____
First Middle Last

2. Date of birth: 05/05/1979
3. I reside in this judicial district (Whatcom County)
4. This application is made for the following reasons:

5. This application is not made for any illegal or fraudulent purpose.
6. I am not a convicted felon under supervision of the Department of Corrections, nor am I a registered sex offender. (Any such persons must follow different statutory procedures to get a change of name.)
7. The change of name will not be detrimental to the interests of any other person(s).

If the name change is for a child under age 18:

- Both parents agree to the name change.
 The non-petitioning parent disagrees.
 The non-petitioning parent has had not contact with the child for approximately _____ years.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING STATEMENTS IN THIS PETITION ARE TRUE AND CORRECT.

Signed at Lynden, WA on 7/7/19 (date)

M.A. Chavez
Signature

12345 10th AVE
Address

Lynden, WA Zipcode
City/State/Zip

360-950-5555
Phone Number

Petition for Change of Name