

1 IN THE CIRCUIT COURT OF THE STATE OF OREGON  
2 FOR THE COUNTY OF DESCHUTES

3 In the Matter of the Change of Name of a Minor Child: )

4 \_\_\_\_\_, )  
(Present Name of Minor Child) )

5 To \_\_\_\_\_, )  
6 (New Name of Minor Child) )

7 By \_\_\_\_\_, )  
8 (Guardian Ad Litem) Petitioner. )

Case No. \_\_\_\_\_

) AFFIDAVIT RE POSTING NOTICE OF  
) NAME CHANGE MINOR CHILD

9  
10 STATE OF OREGON, County of Deschutes) ss.

11  
12 I, \_\_\_\_\_, being first duly sworn, do hereby declare that, in  
13 accordance with law, a written notice of the name change of a minor child, decreed by this court on  
14 \_\_\_\_\_, 20\_\_\_, was posted by me in a public place, namely the Deschutes County  
15 Courthouse, located at 1164 NW Bond, Bend, Oregon 97701, on \_\_\_\_\_, 20\_\_\_,  
16 and remained posted there for at least \_\_\_\_\_ days. A copy of the notice so posted is attached.  
17

18 \_\_\_\_\_  
19 Signature of Petitioner

20  
21 SIGNED AND SWORN to before me on \_\_\_\_\_, 20 \_\_\_\_.

22  
23 \_\_\_\_\_  
24 Court Clerk/Notary Public for the State of \_\_\_\_\_  
25 My commission expires: \_\_\_\_\_  
26

1 Submitted by:

2 \_\_\_\_\_  
3 Attorney/Petitioner's Name

Address

4 \_\_\_\_\_  
5 City

State

Zip

Phone No.

If Attorney: Bar No.

E-mail

Fax

6 Certificate of Document Preparation

7 If this document was not completed by an attorney, I hereby certify that the following statements are true: (check all boxes and complete all blanks that apply)

8 A.  I selected this document for myself, and I completed it without paid assistance.

B.  I paid or will pay money to \_\_\_\_\_ for assistance in preparing this form/document.

9 DATED \_\_\_\_\_

\_\_\_\_\_  
Signature