

FORM 9

IN THE CIRCUIT COURT OF THE STATE OF OREGON
For _____ County

In the Matter of the Change of Name of:

Present Name of Child – Last, First Middle

to

Proposed Name of Child – Last, First Middle

Petitioner/Guardian Ad Litem *(Name of Adult)*

Case No. _____

**PROOF OF SERVICE re PETITION &
NOTICE OF NAME CHANGE HEARING**

I, _____ *(print name)*, am a resident of
_____ County, State of _____. I am a competent person 18 years of
age or older. I am not a party to this proceeding. I am not an employee of or attorney for applicant.

I personally served the Petition for Name Change of a Minor and Notice of Name Change Hearing on:

_____ *(names)*,
who is/are the child's mother father legal guardian on:

_____ *(date of service)*.

I declare that the above statements are true. I understand they are made for use as evidence in court, and I am subject to penalty for perjury.

Date

Signature of Server

Printed Name