

THIS FORM MUST BE COMPLETED BY A NOTARY

**THE COURT OF COMMON PLEAS FOR THE STATE OF DELAWARE
IN AND FOR NEW CASTLE COUNTY**

IN RE CHANGE OF NAME OF:

_____)
_____)
_____) C.N. No. _____)
to _____)
_____)

AFFIDAVIT

STATE OF DELAWARE)
COUNTY OF _____)

BE IT REMEMBERED that on _____ day of _____, 20____,
Petitioner(s) personally appeared before me, the Subscriber, a Notary Public in and for
the State and County aforesaid and being duly sworn by me according to law, deposes
and says that he/she is the Petitioner(s) above named, and that the facts set forth in the
Petition are true and correct to the best of their knowledge or belief.

PETITIONER'S SIGNATURE

PETITIONER'S SIGNATURE

SWORN AND SUBSCRIBED before me the day and year first above written.

NOTARY