

IN THE CIRCUIT COURT OF _____, MISSOURI

(County where court is located. City of St. Louis is considered a county.)

In re:

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Petitioner (Enter your full legal name above)

Case No. _____
(Use number on Petition)

Division No. _____
(Use number on Petition)

Judgment for Change of Name of Adult Individual

1. Parties Appearing (Check all that apply)

Petitioner _____
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

You are the Petitioner in this case.

- appears in person.
- appears by Attorney.

2. The court finds that the change of name would be proper and would not be detrimental to the interests of any other person.

3. The name of Petitioner is changed as follows:

From _____
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

To _____
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Birth Date _____
(mm/dd/yyyy)

4. Change of Birth Records (Check one of the two boxes)

- It is further ordered that the Division of Health and Senior Services, Bureau of Vital Statistics for the State of Missouri alter the birth certificate of Petitioner to reflect this judgment. This judgment shall be mailed by the Petitioner to the Division of Health and Senior Services.
- It is further ordered that the State of _____ alter the birth certificate of Petitioner to reflect this judgment. This judgment shall be mailed by the Petitioner to the appropriate state of birth of Petitioner.

5. Notice (Check one of the two boxes)

Notice of the change of name shall be published at least once each week for three consecutive weeks in the following newspaper of general circulation:

No notice of change of name is to be published because the petitioner is the victim of a crime based upon domestic violence as defined in §455.010, RSMo; or the victim of child abuse as defined in §210.110, RSMo; or the victim of abuse by a family or household member as defined in §455.010, RSMo.

6. Court Costs (Check one of the two boxes)

Court costs are waived.

Court costs are to be paid from the court cost deposit(s) previously posted.

7. Waiver of Right to Rehearing (If case is heard by a Commissioner pursuant to §487.010, RSMo, et seq.)

We, the undersigned parties, do hereby acknowledge receipt of the findings and recommendations of the commissioner and waive the right to file a motion for rehearing in this case.

Signature of Petitioner's Attorney _____

Signature of Petitioner _____

(If heard by a Family Court Judge)

(Judge)

(Date)

(If heard by a Family Court Commissioner)

Findings and Recommendations of Commissioner:

(Commissioner) (Date)

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

(Judge) (Date)

A certified copy of this judgment is to be mailed to the following person(s): (Check all applicable boxes)

(Print Name of Petitioner's Attorney)

(Street)

(City, State, Zip)

(Telephone Number with Area Code)

(Print Name of Petitioner)

(Street)

(City, State, Zip)

(Telephone Number with Area Code)