Form D – Name Change for Family

INSTRUCTIONS FOR CHANGE OF NAME

Please read the Instructions for Change of Name carefully or have someone explain them to you. **All responses must be typed and form cannot be re-typed.**

THE FOLLOWING FORMS ARE INCLUDED IN THIS PACKET AND MUST BE SUBMITTED UPON COMPLETION:

PETITION

FACT SHEET

NOTICE OF CHANGE OF NAME

ORDER

NOTICE TO CONVICTED SEXUAL OFFENDERS

PURSUANT TO ACT 47, SESSION LAWS OF 2007, IF YOU ARE A CONVICTED SEXUAL OFFENDER, WITH AN OBLIGATION TO REGISTER UNDER CHAPTER 846E, HAWAI'I REVISED STATUTES, YOU ARE PROHIBITED FROM CHANGING YOUR LEGAL NAME IN THE OFFICE OF THE LIEUTENANT GOVERNOR, WITHOUT PRIOR COURT APPROVAL.

TO ENSURE COMPLIANCE WITH THE LAW, THE OFFICE OF THE LIEUTENANT GOVERNOR WILL CONDUCT A CRIMINAL BACKGROUND CHECK ON ALL NAME CHANGE APPLICANTS.

\$50 NON-REFUNDABLE FILING FEE

A filing fee in the amount of \$50.00 is required for each name change Petition. Once received by the Office of the Lieutenant Governor, this fee is **non-refundable**. All Petitions must be accompanied by a Money Order or Cashier's Check made payable to the Office of the Lieutenant Governor in the amount of \$50.00. No personal checks will be accepted. Cash payment will only be accepted when the Petitioner hand carries documents into the Office of the Lieutenant Governor.

INSTRUCTIONS FOR COMPLETING THE PETITION (pages 7 to 11)

- (1) This is the official heading. Type in **full, legal names** of both spouses or civil union partners (Petitioner 1 and Petitioner 2) and their minor children, which would be the names exactly as they appear on the birth certificates, unless it has been legally changed through marriage or other legal name change. **DO NOT TYPE IN THE NAME YOU ARE USING NOW UNLESS IT IS YOUR LEGAL NAME.**
- (2) Type each Petitioner's full, legal names in the spaces provided.
- (3) Type in all information requested for the Petitioner 1. If Petitioner 1's father's name is not listed on the birth certificate, type in "unknown".
- (4) Type in Petitioner 1's name as it appears on birth certificate/certificate of naturalization.
- (5) Type in all other names Petitioner 1 has used even if they were not legal names. If Petitioner 1's name has been changed previously, provide the former name, date and the place where the name change(s) was/were granted. This includes divorced persons whose divorce decree changes their name(s).
- (6) Type in all information requested for the Petitioner 2. If Petitioner 2's father's name is not listed on the birth certificate, type in "unknown".
- (7) Type in Petitioner 2's name as it appears on birth certificate/certificate of naturalization.
- (8) Type in all other names Petitioner 2 has used even if they were not legal names. If Petitioner 2's name has been changed previously, provide the former name, date and the place where the name change(s) was/were granted. This includes divorced persons whose divorce decree changes their name(s).
- (9) Both spouses or civil union partners and their children must be residents of the State of Hawai'i. You must provide a street address. For those locations where there are no street addresses, P.O. Boxes may be entered, but please describe the general location of residence.
- (10) Type in the information requested for all minor children of Petitioners, including those whose names are not being changed.
- (11) Check the appropriate response. If either Petitioner has been convicted of a felony or a sexual offense, please state the type and date of conviction, and final disposition of the case. Fully explain the charges, the sentence, the terms and conditions of parole or probation, the date of final discharge of the sentence, whether there was a deferred acceptance of a guilty or no contest plea, if there was a pardon, and by whom the pardon was granted.
- (12) Type in the names of the Petitioners exactly as they want them to appear after they are legally changed. Do the same for each of the minor children whose names are being changed.
- (13) Type the names of the Petitioners and minor children as they appear in the heading and then as you want them to appear after they are changed.
- (14) Type the date, either at the time you have it notarized or before you have it notarized. If you date it

after the date it is notarized it will not be processed. Type the name of the city in the second blank.

- (15) Sign petition in black ink in front of a notary public. DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE. The notary will complete their portion of this page. Notary Public must be commissioned by the State of Hawaii or the military of the United States of America.
- (16) Type the full, legal name of both petitioners.
- (17) **Sign the petition in black ink in front of the notary.** Do not use initials or nicknames, sign your full, legal name. The notary will complete his/her portion of this page.

The **PETITION** for Change of Name must be submitted with the **NOTICE OF CHANGE OF NAME** and **ORDER** properly filled out. The directions for filling out these two documents are provided below.

ORDER (pages 16 & 17) Type in Petitioners' name, address and phone number in the space provided. Type in the full, legal name, one on each line after "In the Matter of the Petition of." Type Petitioners' legal names in the heading exactly as they appear on the Petition. Leave the spaces for dates in the body of the document blank, but type in Petitioners' legal names and new names in the proper spaces. We will fill in the dates of publication. Submit one (1) original and five (5) copies of the ORDER to our office along with the PETITION.

Once our office receives the AFFIDAVIT from the newspaper showing publication of your name change, the Lieutenant Governor will sign the administrative ORDER and it will be sent to you. You must file a copy of the ORDER with the Bureau of Conveyances within sixty (60) days after the signing of the ORDER, (See H.R.S. §574-6(b)).

2) **NOTICE OF CHANGE OF NAME** (pages 18 & 19) At the top left-hand corner type your name and address in the space provided. Type in Petitioners' legal names in the heading exactly as they appear on the Petition. Type Petitioners' legal names in the space provided in the body of the document and then the names as you wish them changed.

Submit one (1) original of NOTICE OF CHANGE OF NAME, copies are not required. Once your Petition has been approved, the Lieutenant Governor will sign the NOTICE OF CHANGE OF NAME and it will be returned to you. You will be responsible for submitting the NOTICE OF CHANGE OF NAME to the newspaper agency for publication. The NOTICE OF CHANGE OF NAME must be published in a newspaper of general circulation in the State of Hawai'i within sixty (60) calendar days after it is signed by the Lieutenant Governor. Failure to publish within the time required automatically voids the PETITION for change of name.

The newspaper will mail an AFFIDAVIT of publication to our office and a copy of the AFFIDAVIT to you, for your files. If we do not receive an AFFIDAVIT from the newspaper by the end of sixty (60) days, we will assume that you did not have the NOTICE OF CHANGE OF NAME published and your PETITION will be voided.

NOTE: The newspaper provides the affidavit, you do not have to provide that form.

INSTRUCTIONS FOR COMPLETING THE NOTICE OF CHANGE OF NAME (pages 20 to 21)

- At the top of the page, type Petitioners' names, address and telephone number in the space provided.
- Type the heading exactly as you did in the Petition"
- In the space after "Upon the consideration of the Petition of" type the Petitioners' full legal names as they appear on the heading.
- Type the Petitioners' and child(ren)'s full names exactly as they appear on the birth certificates (unless they have been legally changed) in the spaces after "the names of".
- Type the Petitioners' and child(ren)'s new names after "shall be changed to".
- Submit one (1) original of NOTICE OF CHANGE OF NAME. Copies are not required. Once your Petition has been approved, the Lieutenant Governor will sign the NOTICE OF CHANGE OF NAME and it will be returned to you. You will be responsible for submitting the NOTICE OF CHANGE OF NAME to the newspaper agency for publication. The NOTICE OF CHANGE OF NAME must be published in a newspaper of general circulation in the State of Hawai'i within sixty (60) calendar days after it is signed by the Lieutenant Governor.
- Failure to publish within the time required automatically voids the Petition for Change of Name.
- The newspaper will mail an AFFIDAVIT of publication to our office and a copy of the AFFIDAVIT to you, for your files. If we do not receive an AFFIDAVIT from the newspaper by the end of the sixty (60) days, we will assume that you did not have the NOTICE OF CHANGE OF NAME published and your Petition will be voided at the end of sixty (60) days.

NOTE: The newspaper provides the affidavit, you do not have to provide that form.

INSTRUCTIONS FOR COMPLETING THE ORDER (pages 18 to 19)

- Halfway down the page, type in Petitioners' names, addresses and telephone numbers in the space provided.
- Type the heading exactly as it appears on the Petition.
- Type the petitioner and child(ren)'s full names exactly as they appear on the birth certificates (unless they have been legally changed) in the space after "the notice of change of names of".
- Leave the "published on" space blank.
- In the next spaces, type the petitioners and child(ren)'s names exactly as they appear in the heading, and then the names you want them to beafter they are changed.
- Leave all other spaces blank.
- Submit one (1) original and five (5) copies of the ORDER to our office along with the original Petition.

Once our office receives the AFFIDAVIT from the newspaper showing publication of your name change, the Lieutenant Governor will sign the administrative **ORDER** and it will be sent to you. You must file the original **ORDER** with the Bureau of Conveyances within sixty (60) days after the signing of the **ORDER**. (See H.R.S. §574-6(b)).

INSTRUCTIONS FOR SUBMITTING DOCUMENTS

Mail or deliver the documents to:

Office of the Lieutenant Governor Hawai'i State Capitol 415 South Beretania Street, 5th Floor Honolulu, Hawai'i 96813

Please do not hesitate to contact our office prior to submitting documents and payment if you have any questions, as the filing fee is non-refundable.

Phone: (808) 586-0255 Website: <u>www.ltgov.hawaii.gov</u>

The following must be submitted to the Office of the Lieutenant Governor:

BIRTH CERTIFICATE OR CERTIFICATE OF NATURALIZATION- a <u>certified</u> copy of original birth certificate of each spouse or civil union partner and their children from the state in which they were born. Certification of the birth certificate <u>must not be older than **90 days**</u> prior to submission of your name change Petition. Original Certificate of Naturalization (if applicable) must also be submitted.

If either spouse or civil union partner or their children are not a U.S. Citizen, please provide a photocopy of their passport AND either of the following: (1) a certified copy of foreign birth certificate, which must be translated and submitted with notarized certificate of translation; (2) a certified copy of family register, which must be translated and submitted with notarized certificate of translation; or (3) a photocopy of alien registration card.

PETITION – notarized by a notary commissioned by the State of Hawaii or the military of the United States of America within **30 days** prior to submission of name change forms.

FACT SHEET – completed fact sheet.

NOTICE OF CHANGE OF NAME – one original.

ORDER- original plus five (5) copies (pgs. 18 & 19)

NON-REFUNDABLE FILING FEE- Money Order or Cashier's Check made payable to the Office of the Lieutenant Governor in the amount of \$50.00; No personal checks will be accepted. Cash will only be accepted when the petitioner hand carries documents into the Office of the Lieutenant Governor.

SUPPORTING DOCUMENTS- Marriage Certificate, Divorce Decree, Death Certificate, Paternity Documents, Adoption Decree, Guardianship documents, prior name change decree, if applicable (copies acceptable).

CONSENT FORM – Consent Form, signed by minor child(ren) if over 10 years of age.

ENVELOPES- Please enclose 2 self-addressed-stamped-envelopes:

1 each-#10 (regular) envelope with 1 first class stamp.

1 each- large flat manila envelope with \$2.00 stamps

CORRECTIONS- Petitions with corrections must be initialed by the notary public.

A PETITION CONTAINING TYPOGRAPHICAL ERRORS, MISSING INFORMATION OR OTHERWISE NOT IN CONFORMANCE WITH THESE INSTRUCTIONS WILL BE DENIED.

NOTICE REGARDING LEGAL ADVICE

The Office of the Lieutenant Governor cannot render legal advice regarding name changes. We can only answer questions related to the procedures involved in processing name changes. IF YOU HAVE LEGAL QUESTIONS, YOU SHOULD CONTACT AN ATTORNEY.

FOR YOUR INFORMATION

Regarding the first page of the **PETITION**

I. Petitioner 1

| | | 1 cuttoner 1 | | | |
|-----|--|---------------------|--------------|---|-----------|
| (3) | That your Petitioner is | | | ; | |
| | date of birth is | | | ; | |
| | (petitioner) | | | | |
| | place of birth is | | | ; | |
| | (petitioner) Petitioner 1's father's name is (petitioner) (Name as a | | | | ; |
| | (petitioner) (Name as a Petitioner 1's mother's maiden name is | shown on birth | certificate) | | • |
| | Petitioner 1's mother's maiden name is _ | (First) | (Middle) | | (Surname) |
| | | II. Petitioner 2 | | | |
| | That your Petitioner is | | | ; | |
| | date of birth is | | | ; | |
| | (petitioner) | | | | |
| | place of birth is(petitioner) | | | ; | |
| | Petitioner 2's father's name is | | | | ; |
| | (petitioner) (Name as a Petitioner 2's mother's maiden name is | shown on birth | certificate) | | |
| | | (First) | (Middle) | | (Surname) |

IN THE OFFICE OF THE LIEUTENANT GOVERNOR

OF THE STATE OF HAWAI'I

| In the | e Matter of the Petition | |
|--------|--|---|
| | of | |
| (1) | (Petitioner 1) and |)))) |
| for th | (Petitioner 2) nemselves and for and on behalf of |)))) |
| | minor children, Change of Names |))))) |
| | | |
| | | PETITION |
| OF H | TO THE HONORABLE JOSH HAWAI'I: | HUA B. GREEN, LIEUTENANT GOVERNOR OF THE STATE |
| | (2) COMES NOW | |
| | and | (Petitioner 1) your Petitioners herein, and respectfully |
| | (Petitioner 2) | nanging their names and the names of their minor child and in |
| (3) | support thereof represent as follows: That your Petitioner 1 is | I. (Petitioner 1) , whose date of |
| | | _; |
| | | ; |
| | Petitioner 1's father's name is | ; |
| | Petitioner 2's mother's name is | (First, middle, and surname) |
| | 1 entioner 2 s mouner s name is | ; (First, middle, and surname) |

| That the name on your Petitioner 1's birth certificate/certificate of naturalization is | | |
|---|------------------------------------|----------------------|
| That other names your Petitioner | · 1 is using or has used are as fo | ollows: |
| | II. (Petitioner 2) | |
| That your Petitioner 2 is | | |
| date of birth is | | |
| place of birth is | | |
| Petitioner 2's father's name is Petitioner 2'smother's name is | (First, middle, and surnam | ne) |
| That the name on your Petitioner | 2's birth certificate/certificate | of naturalization is |
| That other names your Petitioner | · 2 is using or has used are as fo | ollows: |
| | III. | |
| That your Petitioners' residence and their present address is | | |
| | (residential address | s) |
| | IV. | |
| That your Petitioners are the pare | ents of the following minor chi | ldren: |
| Name on Birth Certificate | Date of Birth | Place of Birth |
| | | |
| | | |
| | | |

| (11) | That your Petitioner 1: has not been convicted of a felony or a sexual offense. | | | | |
|------------|--|---|--|--|--|
| | | | | | |
| | has been convicted of a felony. | | | | |
| | has been convicted of a sexual offense. | | | | |
| | Felony or Sexual Offense <u>Date of Conviction</u> <u>Disposition</u> | | | | |
| questions: | If Petitioner 1 has been convicted of a felony or a sexual offense, respond to the following | g | | | |
| 1. | Fully explain the charges. | | | | |
| 2. | Fully explain the sentence. | | | | |
| 3. | Fully explain the terms and conditions of parole or probation. | | | | |
| 4. | Fully explain the date of final discharge of the sentence. | | | | |
| 5. | Fully explain whether there was a deferred acceptance of a guilty or no contest plea. | | | | |
| 6. | Fully explain if there was a pardon, and by whom the pardon was granted. | | | | |
| | That your Petitioner 2: | | | | |
| | has not been convicted of a felony or a sexual offense. | | | | |
| | has been convicted of a felony. | | | | |
| | has been convicted of a sexual offense. | | | | |
| | Felony or Sexual Offense Date of Conviction Disposition | | | | |

If Petitioner 2 has been convicted of a felony, respond to the following questions:

| 1. | Fully explain the cha | irges. | | |
|-------|--|----------------------|---|----------|
| 2. | Fully explain the sen | itence. | | |
| 3. | Fully explain the terr | ms and conditions | of parole or probation. | |
| 4. | Fully explain the dat | e of final discharge | e of the sentence. | |
| 5. | Fully explain whether | er there was a defer | rred acceptance of a guilty or no contest ple | ea. |
| 6. | Fully explain if there | was a pardon, and | d by whom the pardon was granted. | |
| | | | VI. | |
| | | e good law-abiding | rpose of avoiding payment of debts to creding citizens and your Petitioners state that this purposes. | |
| | | | VII. | |
| | That your Petitioners | s are now requestin | ng that they be permitted to change their na | mes to |
| | | a | and | |
| and o | (Petitioner 1) of their minor children t | _ | (Petitioner 2) | , , |
| | | and _ | | |
| follo | | Petitioners pray tl | hat an order be entered herein changing the | names as |
| | <u>FROM</u> | | <u>TO</u> | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| (14) | DATED: | , Hawai'i. |
|------|--|---|
| (15) | | Petitioner 1(sign name in full) |
| | | Petitioner 2(sign name in full) |
| | State of County of |)) SS.) |
| (16) | (1) | etitioner 1) |
| | (Petition) and say: | being first duly sworn on oath depose er 2) ners named herein, that they have read the foregoing Petition, |
| | · | that the same are true to the best of their knowledge. |
| (17) | | (Sign Name in Full) Print Name Petitioner 1 |
| | Subscribed and sworn to before m is day of | |
| | otary Public, State of | |
| M | rinted Name: | Doc. Date: # Pages: Circuit Doc. Description: (Stamp or seal) |
| | | Notary Signature Date |

| | (Sign name in full) Print Name Petitioner 2 |
|--|---|
| Subscribed and sworn to before me this day of, 20_ | <u>.</u> |
| Notary Public, State of Printed Name: | (Notary Stamp or Seal) |
| My Commission Expires: | Doc. Date: # Pages: Circuit Doc. Description: (Stamp or seal) |
| | Notary Signature Date |

The following is to be signed by the minor(s) (if over the age of ten) and returned with the Petition for change of name.

CONSENT TO CHANGE OF NAME

| I, | , whose parents (Petitioners) are |
|-------------------------------|-----------------------------------|
| | and |
| presently residing at | |
| do hereby consent to having m | y name changed from |
| to | |
| DATED: | |
| | Signature of Minor |
| | Signature of Petitioner 1 |
| | Signature of Petitioner 2 |
| <u>(</u> | CONSENT TO CHANGE OF NAME |
| I, | , whose parents (Petitioners) are |
| | and |
| presently residing at | |
| do hereby consent to having m | y name changed from |
| to | |
| DATED: | |
| | Signature of Minor |
| | Signature of Petitioner 1 |
| | Signature of Petitioner 2 |

FACT SHEET

(INFORMATION REGARDING THE PETITIONER 1)

Each Petitioner shall answer the following questions fully and completely and submit this FACT SHEET with your Petition for Change of Name.

| 1. | What is the name on your B | irth Certificate? | What i | s the File No? | | Dated |
|--------|--------------------------------|----------------------------|-----------|----------------|---------|-------------|
| 2. | What is the name on your C | ertificate of Naturalizat | ion? | What is the No | 9? | Dated |
| 3. | What name appears on your | social security card? | | | | |
| 4. | What name do you use in yo | our employment? | | | | |
| 5. | List all of your marriages, di | vorces, dates and place | es therec | of: | | |
| Marrie | ed to | Date of Marriage | | | Place o | of Marriage |
| Divor | ced From | Date of Divorce | | | Place o | of Divorce |
| 6. | List the names, date and place | ce of birth of all your li | ving chi | ldren: | | |
| Name | | Date of Birth | | | Place o | of Birth |
| 7. | What is the reason for legali | zing this name change? | , | | | |
| | | | | | | |

| I was born in the State of Hawai'i, and wish to have the name on my birth certificate amended in the following way: | | | | |
|---|---|------------------------------|--|--|
| First Name | Middle Name | Last Name | | |
| I (Minor Child) was bor led in the following way: | n in the State of Hawai'i, and wish to have | the name on my birth certifi | | |
| ied in the following way. | | | | |
| First Name | Middle Name | Last Name | | |
| | | | | |
| First Name | Middle Name | Last Name | | |

FACT SHEET

(INFORMATION REGARDING PETITIONER 2)

Each Petitioner shall answer the following questions fully and completely and submit this FACT SHEET with your Petition for Change of Name.

| 1. | What is the name on yo | ur Birth Certificate? | What | is the File No? | Dated |
|---------------|---|------------------------------|-------------|------------------------|----------------------|
| 2. | What is the name on yo | ur Certificate of Naturaliz | zation? | What is the No? | Dated |
| 3. | What name appears on | your social security card? | | | |
| 4. | What name do you use | in your employment? | | | |
| 5. | List all of your marriage | es, divorces, dates and pla | ices there | of: | |
| <u>Marrie</u> | ed to | Date of Marriage | | Place | e of Marriage |
| <u>Divor</u> | ced From | Date of Divorce | | Place | e of Divorce |
| 6. | List the names, date and | l place of birth of all your | · living cł | nildren: | |
| <u>Name</u> | | Date of Birth | | Place | e of Birth |
| 7. | What is the reason for l | egalizing this name chang | ge? | | |
| 8. | I was born in the State of following way: | of Hawai'i, and wish to ha | nve the na | ame on my birth certif | icate amended in the |
| | First Name | Middle Nar | ne | | Last Name |
| | |) | | | |

| LAND COURT |)))))))))))))) REGULAR SYSTEM |
|--|--|
| | REGOLIAN STSTEM |
| Name: Address: City, State, Zip Code: Telephone #: | |
| IN THE OFFICE | OF THE LIEUTENANT GOVERNOR |
| | STATE OF HAWAI'I |
| | |
| In the Matter of the Petition | |
| of | |
| and (Petitioner 1) |)) |
| |)) ORDER |
| (Petitioner 2) for themselves and for and on behalf of | |
| |))) |
| minor children |) |
| For Change of Names |)) |

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| havina haan ayblishad an | : |
| naving been published on | in a |
| awai'i, I, JOSHUA B. GREEN, Lieutena | nt Governor of t |
| by law and thereunto enabling, do hereb | y order that the |
| | |
| , and | |
| , | |
| effective | _• |
| | |
| IOSHIIA D. CDEEN | |
| | awai'i |
| | having been published onawai'i, I, JOSHUA B. GREEN, Lieutena by law and thereunto enabling, do hereb |

Name: Address: City, State, Zip Code: Telephone #

IN THE OFFICE OF THE LIEUTENANT GOVERNOR

In the Matter of the Petition of and (Petitioner 1) (Petitioner 2) for themselves and for and on behalf of

minor children
)
For Change of Names
)

NOTICE OF CHANGE OF NAMES

| Upon consideration of the Petition of, | |
|--|---|
| , | |
| and, | |
| and there appearing to me to be good reasons for granting the same: | |
| NOW, THEREFORE, by virtue of the authority vested in me by law and thereunto | |
| enabling, I, JOSHUA B. GREEN, Lieutenant Governor of the State of Hawai'i, do hereby give public notice that | |
| the names of | _ |
| | |

| and | shall be changed to |
|--------------------|--|
| | |
| and | upon a single publication in the <u>Honolulu Star-Advertiser</u> , a newspaper |
| of general circula | on in the State of Hawai'i, published in Honolulu, Hawai'i. |
| | |
| | DATED: Honolulu, Hawai'i |
| | TO CANALL DE CONTROL |
| | JOSHUA B. GREEN |

Lieutenant Governor of the State of Hawai'i

PETITIONER 1 SURVEY SHEET ON VOTER REGISTRATION FOR AMERICAN CITIZENS ONLY

(CHECK ONLY ONE OF THESE)

I am not a registered voter and I am NOT interested in registering under my new name at this time. **STOP. DO NOT FILL OUT OR SIGN THIS FORM.**

I am NOT a registered voter, but would like to register to vote under my new name.

I am a registered voter and would like my name changed on the voter registration list PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHNAGE FORMS.

I am a registered voter and would like my name and address changed on the voter registration list. PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORM.

When you have your name changed legally, you need to change your voter registration as well. Please fill out the information below and return this form with your name change Petition. When your name change order is signed by the Lieutenant Governor, your voter registration will automatically update to reflect your new name.

| 1. | I am registered to vote on |
|-------------|--|
| | I am registered to vote on (Island) |
| 2. | My name is being changed from |
| | to |
| 3. | My residence address is |
| 4. | My telephone number is (H)(B) |
| 5. | My mailing address is |
| 6. | My social security number is |
| 7. | My date of birth is |
| | Signed, |
| | (New Name) |
| | ************************************** |
| Name Change | Effective on: Date granted by Lt. Gov: |

PETITIONER 2 SURVEY SHEET ON VOTER REGISTRATION FOR AMERICAN CITIZENS ONLY

(CHECK ONLY ONE OF THESE)

I am not a registered voter and I am NOT interested in registering under my new name at this time. **STOP. DO NOT FILL OUT OR SIGN THIS FORM.**

I am NOT a registered voter, but would like to register to vote under my new name.

I am a registered voter and would like my name changed on the voter registration list PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHNAGE FORMS.

I am a registered voter and would like my name and address changed on the voter registration list. PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORM.

When you have your name changed legally, you need to change your voter registration as well. Please fill out the information below and return this form with your name change Petition. When your name change order is signed by the Lieutenant Governor, your voter registration will automatically update to reflect your new name.

| 1. | I am registered to vote on |
|-------------|--|
| | (Island) |
| 2. | My name is being changed from |
| | to |
| 3. | My residence address is |
| 4. | My telephone number is (H)(B) |
| 5. | My mailing address is |
| 6. | My social security number is |
| 7. | My date of birth is |
| | Signed, |
| | (New Name) |
| ***** | ********************* |
| (FOR OFFICE | E USE ONLY) |
| Name Change | Effective on: Date granted by Lt. Gov: |