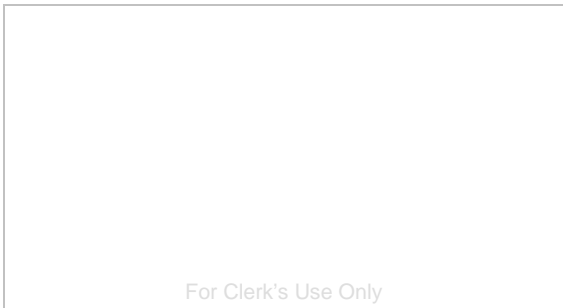


Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

Representing Self, Without a Lawyer



## IN THE SUPERIOR COURT OF ARIZONA, YAVAPAI COUNTY

In the Matter of the Name Change of

Case # 1300CV Div. \_\_\_\_\_

Applicant \_\_\_\_\_

### PROOF OF NOTICE OF HEARING RE: APPLICATION FOR CHANGE OF NAME – ADULT WITH MINOR CHILD(REN)

Date of Birth \_\_\_\_\_

STATE OF ARIZONA )  
County of \_\_\_\_\_ ) ss.

#### I STATE UNDER OATH THE FOLLOWING:

1. **DOCUMENTS PROVIDED:** I provided copies of the following court documents.

1. Application for Change of Name - Adult with Minor Child(ren)
2. Notice of Hearing
3. Consent of Parent to Name Change of Other Parent
4. \_\_\_\_\_

2. **TO WHOM I GAVE NOTICE:** These are the people to whom I gave copies of all the documents listed in Number 1 above.

A. Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Date I gave the documents: \_\_\_\_\_

How I gave the documents -- check at least one box and complete the information:

- Personal service (attach affidavit of acceptance or of process server or sheriff)
- Certified/Registered mail (attach green card to this paper)
- Publication. See attached affidavit.

B. Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Date I gave the documents: \_\_\_\_\_

How I gave the documents -- check at least one box and complete the information:

- Personal service (attach affidavit of acceptance or of process server or sheriff)
- Certified/Registered mail (attach green card to this paper)
- Publication. See attached affidavit.

C. Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Date I gave the documents: \_\_\_\_\_

How I gave the documents -- check at least one box and complete the information:

- Personal service (attach affidavit of acceptance or of process server or sheriff)
- Certified/Registered mail (attach green card to this paper)
- Publication. See attached affidavit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

**SUBSCRIBED AND SWORN** to or affirmed before me on this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_.

My Commission Expires:

\_\_\_\_\_  
Clerk of Superior Court or Notary Public

\_\_\_\_\_