

STATE OF WYOMING) IN THE DISTRICT COURT
) ss
COUNTY OF _____) _____ JUDICIAL DISTRICT

IN THE MATTER of the) Case Number _____
CHANGE OF NAME OF)
_____))
Petitioner)
(current full name of adult asking for change)

MOTION FOR GRANT OF CONFIDENTIALITY

1. I am the Petitioner in this case.
2. I am making this request in accordance with Wyoming Statutes 1-25-101 and 1-25-103 and 35-21-112.
3. I am a victim of domestic abuse.
4. For this name change case, I ask the Court to issue an order prohibiting the release of any information that identifies where I live, including the address, city, and state where I live.
5. ☐ I have been granted an Order of Protection (restraining order, protective order) in the state of _____. The Order I was granted is in effect until _____, 20____.

OR

- ☐ I do not have an Order of Protection, but I am a victim of domestic abuse and more abuse may happen if information about where I live is made public.

6. ☒ I have attached a copy of the Order of Protection or other documents that support my statement. (Other documents might include police reports, a sworn affidavit describing the abuse, or medical records showing treatment for injuries caused by the abuse.)
7. I respectfully ask the Court to issue an order granting confidentiality in this case.

Dated: _____, 20__.

Signature: _____

Printed Current Name: _____

Email Address: _____