

STATE OF WYOMING)
) ss
COUNTY OF _____)

IN THE DISTRICT COURT

JUDICIAL DISTRICT

IN THE MATTER of the)
CHANGE OF NAME OF)

Petitioner)
(current full name of adult asking for change)

Case Number _____

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: _____