

STATE OF WYOMING)
) ss
COUNTY OF)

IN THE DISTRICT COURT
JUDICIAL DISTRICT

IN THE MATTER of the) Case Number _____
CHANGE OF NAME OF)

A Minor Child)
(current full name of child))

By Next Friend)

(full name of adult asking for change))

RESTRICTED: MOTION FOR GRANT OF CONFIDENTIALITY

1. I am the Next Friend 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. The Petitioner Minor Child is 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 the Minor lives, including the address, city, and state where the Minor lives.
5. The Minor has been granted an Order of Protection (restraining order, protective order) in the state of _____ . That Order is in effect until _____ , 20____.

OR

The Minor does not have an Order of Protection, but the Minor is a victim of domestic abuse and more abuse may happen if information about where the Minor lives is made public.

6. I have attached a copy of the Order of Protection or other documents that support my statements. (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.

I have submitted a blank Order Regarding Confidentiality with this Motion.

Dated: _____, 20____

Signature: _____

Printed Name: _____

Email Address: _____

If your contact information is the same as the Minor's contact information,
do not write your phone number or address on this form.

Phone Number: _____

Mailing Address: _____

CERTIFICATE OF SERVICE

I certify that the original of this document was filed with the Clerk of District Court in _____ County, Wyoming.

I further certify that on _____, 20____, a true and accurate copy of this document was served as follows:

Name of the person who was served: _____

That person's relationship to this case: _____

That person was served in this way:

Delivery by hand to: _____ (name)

Fax to this number: _____

Mail by United States Postal Service, postage pre-paid, to:

Name of that person or that person's attorney: _____

Address of that person or that person's attorney: _____

Signature: _____

Printed Name: _____

Date: _____, 20____