

STATE OF WYOMING)
) ss
COUNTY OF _____)

IN THE DISTRICT COURT

_____ JUDICIAL DISTRICT

IN THE MATTER of the)
CHANGE OF NAME OF)

Case Number _____

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

By Next Friend)

_____)
(full name of adult asking for change))

CERTIFICATE OF MAILING FOR PETITION

I certify that on the _____ day of _____, 20____, I caused a true and correct copy of the Petition and Affidavit for Change of Name of a Minor along with the Summons to Respondent to be mailed via US Mail Certified Return Receipt Requested to the Respondent whose name and address are:

DATED _____, 20____.

CLERK or DEPUTY CLERK of District Court

Copies to:

Next Friend's or Attorney's Name and Address:

Respondent's or Attorney's Name and Address:
