

Your Name: _____
Address: _____

Telephone: _____
Email Address: _____
Self-Represented

DISTRICT COURT
_____ **COUNTY, NEVADA**

In the Matter of the Application of:

(Parent's name(s))
For Change of Name of the Minor Children:

(First child's name)

and *(Second child's name or "N/A")*

CASE NO.: _____
DEPT: _____

CERTIFICATE OF MAILING (PUBLICATION)

I, *(name of person who mailed the document)* _____,
declare under penalty of perjury under the law of the State of Nevada that the following is true
and correct. That on *(month)* _____ *(day)* _____, 20____, I served the:

check all that apply

- Petition to Change Minor Child(ren)'s Name
 Notice of Petition to Change Minor Child(ren)'s Name

pursuant to 2017 Nevada Laws Ch. 161 (A.B. 232), by depositing a copy of same in the U.S. Mail
by ***check one*** certified mail registered mail, addressed as follows:

(Print the name and address of the person you mailed the documents to)

Name: _____
Address: _____
City/State/Zip: _____

DATED *(month)* _____ *(day)* _____, 20____.

(signature) ▶ _____