

# Affidavit of Name Change

State of \_\_\_\_\_  
County of \_\_\_\_\_

I, \_\_\_\_\_, being duly sworn, depose and state the following:

- 1. My current full legal name is \_\_\_\_\_.
- 2. My previous name was \_\_\_\_\_.
- 3. I was born on \_\_\_\_\_ in \_\_\_\_\_.
- 4. I am requesting this name change for the following reason:  
\_\_\_\_\_
- 5. I affirm that this name change is not for any fraudulent purpose and that I am not seeking to avoid any debts or obligations.

I make this affidavit to declare that I am now known as \_\_\_\_\_ and request that all my records and identification reflect my new legal name.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Notary Public