KITSAP COUNTY DISTRICT COURT STATE OF WASHINGTON

IN THE MATTER OF THE NAME CHANGE OF $-$	No
·	NAME CHANGE DECLARATION OF SERVICE AMENDED

My name is ______ and I hereby make the following declaration –

1. DOCUMENT(S) SERVED

I served a copy of the following –

Name Change Petition (Adult Petitioner)

Name Change Petition (Minor Petitioner)

Name Change Petition (Parent Or Guardian Petitioner)

- Notice Of Court Date (Name Change)
- Other _____

2. AGENCY SERVED

[Note – Do not complete section 2 if it does not apply]

[Note – If used, go to section 6 after completing section 2. Do not complete sections 3, 4, and 5.]

I served the above document(s) on the –

- Washington State Department of Corrections -
 - Email at docamendedorders@doc.wa.gov
- Washington State Patrol -
 - Email at crimhis@wsp.wa.gov
 - Mail, postage prepaid, to Washington State Patrol, Criminal History Records Section, PO Box 42633, Olympia, WA 98504
- Kitsap County Sheriff's Office -
 - In person at Kitsap County Sheriff's Office, 614 Division St., Port Orchard, WA
 - Mail, postage prepaid, to Kitsap County Sheriff's Office, 614 Division St., MS-37, Port Orchard, WA 98366

3. OPPOSING PARTY REPRESENTATION

[Note – Do not complete section 3 if section 2 is used]

<u>Represented</u> – The opposing party is represented by an attorney.

[Note – Where a party is represented, service is required to be made on their attorney]

<u>Not Represented</u> – The opposing party is not represented by an attorney.

4. PERSON SERVED

[Note – Do not complete section 4 if section 2 is used]

I served the above document(s) on the following person -

(name of person served)

5. METHOD OF SERVICE

[Note – Do not complete section 5 if section 2 is used]

I made service of the above document(s) as follows –

<u>Email Service Generally Required</u> – Service by email is required unless – (1) the email address of the person served is unknown; <u>or</u> (2) District Court has found good cause to require another method of service; <u>or</u> (3) the parties have agreed in writing to another method of service.

On (date) ______ at (time) _____, I emailed the above document(s) to the person served by emailing the document(s) to the following email address –

<u>Mail Service</u> – On (date) _____, I mailed postage prepaid the above document(s) to the person served to the following location –

_____ <u>Personal Service</u> – On (date) ______ at (time) _____, I personally served the above document(s) on the person served at the following location –

_____Other Method of Service – I served the above document(s) on the person served as follows –

6. SERVER CONTACT INFORMATION

[<u>Note</u> – Only one telephone number must be provided]

My contact information is as follows -			
My Name –			
Mailing Address –			
Email –			
Cellphone Number –			
Home Telephone Number-			
Work Telephone Number –			
I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct, and that I am the person whose name I typed (or wrote) below.			
SIGNED at (city)	, (state)	on (date)	
	/s/ Signed Elec	ctronically	

[<u>Note</u> – By typing your name, you intend to sign electronically and agree your electronic signature is the same as a handwritten signature for the purpose of validity, enforceability, and admissibility.]