IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF CLACKAMAS
Probate Department

In the Matter of the Name Change of:

_____ _____
First *Middle*

_____
Last
(PRINT Present Name of Minor Child)

From the Above Name To:

_____ _____
First *Middle*

_____
Last
(PRINT Proposed New Name of Minor Child)

_____
(PRINT Name of Guardian Ad Litem)

CASE NO. _____

PROOF OF SERVICE ON PARENT BY ALTERNATE SERVICE METHOD

I am the Guardian Ad Litem appointed by the Court to represent the minor named above in this matter. On _____ *(insert date of court order)* the Court authorized alternate service on _____. *(insert name of parent served)* I complied with such order as follows: *(describe in detail how you complied with court order).*

_____

_____

(Add additional sheets if necessary, but be sure each sheet includes case number.)
I am attaching copies of all documents served, and any supporting documents about service.

I hereby declare that the above statements are true to the best of my knowledge and belief. I understand they are made for use as evidence in court and are subject to penalty for perjury.

_____ _____
Date **Signature of Guardian Ad Litem**

_____
Print Name

Certificate of Document Preparation. You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:
☐ I selected this document for myself and I completed it without paid assistance.
☐ I paid or will pay money to _____ for assistance in preparing this document.
Submitted by:

_____
Printed Name OSB # if Attorney

_____
Address or Contact Address City, State, Zip Telephone or Contact Number