

COVER SHEET FOR CHANGING AN ADULT'S NAME

The forms presented in this packet are designed to guide you in preparation of your Petition to Change Name of an Adult. You must type in the required information as it applies to your situation. Your papers should remain in the same order as they appear in this packet. Please type this document, or neatly print in black ink.

Do not fill in the civil action file number, because you will not have that until the Clerk assigns a number to your case. Make sure that everything is signed.

Neither the Clerk of the Superior Court, nor any Deputy Clerk, nor the Law Librarian, Judge, or any other Court personnel, is allowed to answer any questions for you concerning the preparation of these forms. State Law O.C.G.A § 15-9-51 procedures and courthouse personnel cannot advise you how to proceed or what forms may be necessary in specific situations. The only person allowed to help you in the preparation of these forms is licensed attorney hired to represent you. Please consult an attorney if you have questions about the procedure or what action is best for you to take.

Remember, you must fully complete the forms and follow all instructions before the Judge will be able to grant your change of name. Incomplete forms, as well as, forms that are improperly filled out, may delay the grant of your change of name. Make sure that you take time to read over all the forms and instructions.

FILING INFORMATION FOR NAME CHANGE

Filing Fee: \$218 Cash (no \$100 bills), money order, or cashier's check (No Personal Checks)
Publication Cost: Contact the **Macon Report** to discuss publication costs.

After your case is *accepted*, YOU must publish the **Notice of Name Change** form with the Macon Reporter. They can be reached by: **Phone:** 478-994-2358 | **Email:** bibblegals@mymcr.net | **Online:** www.mymcr.net/submit_legal_notice/

NOTE:

Once you have received your name change order, signed by the Judge, you must send (1) a certified copy of the order, (2) a money order for \$25, and (3) a photocopy of your photo ID to:

Georgia Department of Vital Records
1680 Phoenix Blvd. #100
Atlanta, GA 30349
404-679-4702

IN THE SUPERIOR COURT OF BIBB COUNTY
STATE OF GEORGIA

In Re the Name Change of:

Plaintiff

Civil Action No.: _____

PETITION CHANGE NAME OF ADULT

The Plaintiff files this Petition to Change Name of Adult and states the following in support of the petition:

1.

The Plaintiff's name is _____ and she/he resides in Bibb County, Georgia. Therefore, jurisdiction and venue are proper in this court.

2.

The Plaintiff was born on _____.

(Check and complete only one of the following)

In _____ County, State _____ U.S.A.

Outside the United State, in _____.

3.

The Plaintiff wants to change his/her name:

From _____

To _____

4.

The reasons for this name change are as follows:

5.

The Plaintiff does not intend to use this name change to fraudulently deprive anyone of any right under the law.

THEREFORE, the Plaintiff asks that the Plaintiff's name be changed as provided in Paragraph 3 above.

This _____ day of _____, 20____.

Plaintiff, Pro Se (Signature)

Name: _____

Address: _____

Phone (day): _____

STATE OF GEORGIA

COUNTY OF BIBB

VERIFICATION

Personally appeared before the undersigned officer authorized by law to administer oaths, the deponent herein, who, an oath, deposes and says that the facts contained in the foregoing document are true and correct.

Plaintiff

Sworn to and subscribed before me

this ____ day of _____, 20_____.

Notary Public

AFFIDAVIT FOR PERSON FILING CASE WITH NO ATTORNEY
(All questions must be answered.)

Plaintiff

vs.

Civil Action No. _____

Defendant

PERSONALLY appeared before me the undersigned officer, _____
(Affiant)

who after being duly sworn deposes and states under oath the following:

- (1) That affiant has this date filed a suit for divorce or other complaint in this County and does not have an attorney at law representing affiant.
- (2) (a) Affiant further states that the following person prepared the Complaint and/or other papers.

Name of Person (and business name) who prepared papers

Address of such person and business

Telephone number of such person and business

- (b) Affiant state that said person who prepared the paper (was/was not) paid to prepare the papers. The total amount paid \$_____.
- (3) Affiant further states that there (is/is not) any further money due anyone for assisting in the preparation of said papers. If affiant owes money to the preparer the amount is \$_____.
- (4) Affiant has not paid or given anyone any other consideration of money for helping in preparing the paper, except the following, _____.
- (5) Did the preparer of the papers tell you what information, or give you advice regarding the information to put in any of your paper? (YES / NO)
- (6) Did the preparer give you any advice about how to file your papers? (YES / NO)
- (7) Did the preparer give you any advice about how to present your case to the judge? (YES / NO)
- (8) Are you willing to discuss this matter with a State Bar or Georgia investigator? (YES / NO)

I have answered all the about questions truthfully, under criminal penalties of perjury.

Sworn to and subscribed before me
this _____ day of _____, 20____.

Affiant

Address

Notary Public
My Commission Expires _____

City State Zip

Phone No. (required): _____

SUPERIOR COURT OF BIBB COUNTY
PARTIES INFORMATION SHEET
TO BE FILED WITH COMPLAINT/PETITION

Plaintiff's Contact Information:

Plaintiff's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Defendant's Contact Information:

Defendant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

**IN THE SUPERIOR COURT OF BIBB COUNTY
STATE OF GEORGIA**

CIVIL ACTION NO. _____

NOTICE OF PETITION TO CHANGE NAME OF ADULT

_____ filed a petition in the
Bibb Superior Court on _____, 20_____, to
change the name from _____ to
_____. Any interest party
has the right to appear in this case and file objections within 30 days after the *Petition* was filed.

This _____ day of _____, 20_____.

Plaintiff, Pro Se (Signature)

Name: _____

Address: _____

Phone: _____

Sworn to and subscribed before me
this ____ day of _____, 20____.

Notary Public (Seal)

General Civil and Domestic Relations Case Filing Information Form

Superior or State Court of _____ County

For Clerk Use Only

Date Filed _____ Case Number _____
MM-DD-YYYY

Plaintiff(s)

Defendant(s)

Last	First	Middle I.	Suffix	Prefix

Last	First	Middle I.	Suffix	Prefix

Plaintiff's Attorney _____

Bar Number _____

Self-Represented

Check One Case Type in One Box

General Civil Cases

- Automobile Tort
- Civil Appeal
- Contract
- Garnishment
- General Tort
- Habeas Corpus
- Injunction/Mandamus/Other Writ
- Landlord/Tenant
- Medical Malpractice Tort
- Product Liability Tort
- Real Property
- Restraining Petition
- Other General Civil

Domestic Relations Cases

- Adoption
- Dissolution/Divorce/Separate Maintenance
- Family Violence Petition
- Paternity/Legitimation
- Support – IV-D
- Support – Private (non-IV-D)
- Other Domestic Relations

Post-Judgment – Check One Case Type

- Contempt
 - Non-payment of child support, medical support, or alimony
- Modification
- Other/Administrative

Check if the action is related to another action(s) pending or previously pending in this court involving some or all of the same parties, subject matter, or factual issues. If so, provide a case number for each.

_____ Case Number

_____ Case Number

I hereby certify that the documents in this filing, including attachments and exhibits, satisfy the requirements for redaction of personal or confidential information in O.C.G.A. § 9-11-7.1.

Is an interpreter needed in this case? If so, provide the language(s) required. _____
Language(s) Required

Do you or your client need any disability accommodations? If so, please describe the accommodation request.

ATTACHMENTS

Parenting Plan

Child Support Order Addendum

Case Disposition Form & 3907 Form

Other _____

General Civil and Domestic Relations Case Disposition Information Form

Superior or State Court of _____ County

For Clerk Use Only	
Date Disposed _____ MM-DD-YYYY	Case Number _____
	Case Style _____

Plaintiff(s)

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Defendant(s)

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Reporting Party _____

Plaintiff's Attorney _____

Bar Number _____

Self-Represented

Defendant's Attorney _____

Bar Number _____

Self-Represented

Manner of Disposition Check Only One
<input type="checkbox"/> Jury Trial
<input type="checkbox"/> Bench/Non-Jury Trial
<input type="checkbox"/> Non-Trial Disposition
<input type="checkbox"/> Alternative Dispute Resolution

- Check if any party was self-represented at any point during the life of the case.
- Check if the court ordered an interpreter for any party, witness, or other involved individual.
- Was the case referred/ordered to a court-annexed alternative dispute resolution (ADR) process?

eFile Registration & Quick Tips

Register to eFile at: <https://efilega.tylertech.cloud>

- Email: _____
- Address: _____
Address: _____
- Phone #: _____
- Password: Abcd1234
- Click on link sent to your email to activate your account.
- Separate, scan, and save your documents to your computer.
- Visit efilega.tylertech.cloud to start filing your case.

- File your case. For assistance visit: odysseyfileandservecloud.zendesk.com/hc/en-us

- All communication about your case will come to the email you provided above. You must file a 'Notice of Address Change' form with the Clerk's Office if you need to update your address or email. Add no-reply@efilingmail.tylertech.cloud to your email contact.
- To view your case, visit <https://researchga.tylerhost.net>. You will log-in using the same email and password you use for eFileGA.

Envelope # _____ Case # _____ (assigned when case is accepted)

- **Cases filed with Poverty Affidavit:** You must wait until the Judge makes a decision on your Poverty Order before moving on to the next steps. If your order is denied, you must pay the filing fee of \$ _____ to proceed with your case. If your Poverty Affidavit is accepted, please proceed to one of the below next steps that apply to the type of case you filed.
- **Cases filed with an agreement:** File your *Request Letter* 46 days after you receive notice that your case has been ACCEPTED. Notification will be sent to you via email.
- **Cases filed with Sheriff Service:** File your *Request Letter* 46 days after Defendant has been served. You will receive email notification once the Defendant has been served.
- **Adult Name Change:** From your email, print the electronic filed-stamped *Notice of Name Change* to The Telegraph. After your case is done running in the paper, request the *Publisher's Affidavit* from the Telegraph and eFile it into your case. File your *Request Letter* after you file the Publisher's Affidavit.
- **Minor Name Change:** File the *Request Letter* after you receive notice that your *Publisher's Affidavit* has been accepted into your case.

Clerk Assisted: _____

Date: _____