ST	TATE OF NORTH CAR	OLINA	File No.	
County		County	In The General Court Of Justice	
NOT	of the General Sta		d of a participant in the address confidentiality program under Chapter 15C olicant who provides the clerk with evidence that the applicant is a victim of S. 101-2(b).	
	IN THE MATTER OF THE CH	ANGE OF NAME		
OF:	True Name (First, Middle, Last format)		NOTICE OF INTENT TO CHANGE NAME (ADULT NAME CHANGE)	
TO:	Name Sought (First, Middle, Last format)		G.S. 101-2	
the		for a change in name as is	County, give notice of my intent to apply to set forth above. After 10 days from the date on which this Notice is e.	
Date That Notice Was Posted At Courthouse Door Name Of Applicant (True Name)		Name Of Applicant (True Name)	Signature Of Applicant	