Skamania County, WA Total:\$0.00 NAME Pgs=2

2021-003055 09/07/2021 03:23 PM

Request of: SKAMANIA COUNTY DISTRICT COURT



RETURN ADDRESS:

SKAMANIA COUNTY DISTRICT COURT 240 VANCOUVER AVE. P.O. BOX 790 STEVENSON, WASHINGTON 98648

PLEASE PRINT OR TYPE INFORMATION:

Document Title(s) or transactions contained therein:			
1. Case #N21-00008, ORDER CHANGING NAME			
GRANTOR(S), LAST NAME, FIRST NAME AND INITIALS.			
1. OLD NAME, <u>SWAYZE, ERIN KRISTINE</u> .			
GRANTEE(S), LAST NAME, FIRST NAME AND INITIALS.			
1. NEW NAME, PERKINS, ERIN KRISTINE.			

COUNTY OF SKAMANIA

I, SA Sactor Clerk of the District Court of Skamania County, Washington, DO HEREBY CERTIFY that this instrument, consisting of pages(s), is a true and correct copy of the original now on file and of record in my office and, as clerk, I am the legal custodian thereof. Signed at Stevenson Washington

District Court Clerk

FILED SEP 07 2021

SKAMANIA CO. DISTRICT COURT STEVENSON, WA

District Court of Washington For Skamania County		No. N21-00008	
In the Matter of the Change of Nan	ne of:	ORDER CHANGING NAME (Adult)	
ERIN KRISTINE SWAYZE			
(Legally Print or Type Full Name Here)	Petitioner		
I.BASIS A verified Petition was filed with the Court requesting that the name of:			
ERIN	KRISTINE	SWAYZE	
First:	Middle:	Last:	
то:		4	
ERIN	KRISTINE	PERKINS	
First:	Middle:	Last:	
	II. FINDINGS		
Based on the case record to date and the testimony at the hearing, if any, the Court finds:			
The Statements in the petition are	e true.	_ \	
The Request to change names is not made for any illegal or fraudulent purpose.			
The change of name will not be detrimental to the interests of any other person.			
The request to change names sh Other:	ould be granted.		
	III. ORDER		
It is hereby ordered that the name:			
ERIN	<u>KRISTINE</u>	SWAYZE	
First:	Middle:	Last:	
Is changed to:			
<u>ERIN</u>	KRISTINE	PERKINS	
First:	Middle:	Last:	
Date: 9/7/2021	J	udge:	