

## SUPERIOR COURT OF CALIFORNIA COUNTY OF SACRAMENTO

720 NINTH STREET – ROOM 102
SACRAMENTO, CA 95814·1380
(916) 874·5522 – WWW.SACCOURT.CA.GOV

## REQUIREMENTS FOR PETITION FOR CHANGE OF NAME AND GENDER

Please read these instructions, along with page two (2) of form *Petition for Changing Name and Gender* form (NC-200). Court staff cannot advise you about completing forms on your case. If you need legal advice about your forms or other issues regarding your case, you may wish to retain an attorney or visit the Civil Self-Help Center located in the Sacramento County Public Law Library at 609 9<sup>th</sup> Street, Sacramento, CA 95814. For additional information you can visit the library's website at: <a href="http://saclaw.org/self-help/civil-self-help-center/">http://saclaw.org/self-help/civil-self-help-center/</a>.

## 1. FORMS IN THIS PACKET

#	Form Name	Form Number
1	Civil Case Cover Sheet	CM-010
2	Petition for Change of Name and Gender	NC-200
3	Order to Show Cause for Change of Name	NC-220
4	Decree Changing Name and Gender	NC-230
5	Attachment to Petition for Name Change	NC-110
6	Petition for Change of Gender and Issuance of New Birth Certificate	NC-300
7	Declaration of Physician – Attachment to Petition	NC-210/NC-310
8	Setting of Hearing on Petition for Change of Gender and Issuance of	NC-320
	New Birth Certificate	
9	Order for Change of Gender and Issuance of New Birth Certificate	NC-330
10	Newspapers of General Circulation	

- 2. FILING FEE/FEE WAIVER: Refer to the *Statewide Civil Fee Schedule* located at: <a href="http://saccourt.ca.gov/fees/docs/fee-schedule.pdf">http://saccourt.ca.gov/fees/docs/fee-schedule.pdf</a> for the current fee amount. If you cannot afford the filing fee you may be eligible for a fee waiver.
- 3. FILING DOCUMENTS: Completed petitions may be submitted at the designated Civil customer service window, TUESDAY FRIDAY ONLY, between the hours of 8:30 a.m. 12:00 p.m., located at the Hall of Justice Building, 813 6<sup>th</sup> Street, Room 212 (2<sup>nd</sup> Floor), Sacramento, CA 95814. Petitions may be mailed or submitted Monday Friday via the Civil Law and Motion Drop Box located in the Civil Law and Motion Lobby (Room 212). Please see #5(c) for document copy requirements.

**4. REQUIRED FORMS:** To ensure you are submitting the mandatory forms required, refer to the table below.

If you are seeking	Complete and submit forms (The numbers refer to the # column in the Table in #1 above.)
A name change only at this time	Review packet <i>Requirements for Petition for Change of Name</i> (CV/E-142-N)
A name change and gender change	1, 2, 3, 4, 5 and 7
A change of gender only	1, 6, 7, 8 and 9
A change of gender and a new birth certificate	1, 6, 7, 8 and 9
Seeking a confidential name change under the	Review packet Requirements for Petition for
Safe at Home Program	Change of Name Under the Address
	Confidentiality Program (Safe at Home) CV/E-
	142-S)

- 5. DOCUMENT REQUIREMENTS: If the petitioner is not represented by an attorney, the petitioner's name, address and telephone number must be typed or printed legibly in the upper left corner of each document. The petition must be signed by each adult who is applying for a change of name and/or gender using that person's current legal name. Please review your documents thoroughly before filing to ensure that ALL the captions, current name and proposed new name match exactly on all documents.
  - **a. NUMBER OF PETITIONS REQUIRED**: Each adult petitioner or emancipated child filing for a name and/or gender change on his or her own behalf must submit a separate set of documents and a separate filing fee. The *Attachment to Petition for Change of Name* form (NC-110) must be completed and attached to the petition for each person whose name and/or gender is to be changed.
  - **b. CAPTIONS**: Examples of the caption and first (1<sup>st</sup>) line of each document where the current name(s) is used are listed in the table below:

If you are	Complete the caption as follows
An adult of emancipated minor	John Doe
One parent or legal guardian filing on behalf of minor child	John Doe on behalf of James Doe, a minor
Both parents filing on behalf of minor child	John Doe and Mary Doe on behalf of James Doe, a minor

- **c. DOCUMENT COPY REQUIREMENTS:** Each original document should have the corresponding copies behind the document. Please submit one (1) original and two (2) copies of each document, except for the Order to Show Cause, three (3) copies are required.
- **6. HEARINGS**: After 2:00 pm on the court day before your hearing date, access the Tentative Rulings by going to the Court's website at <a href="www.saccourt.ca.gov">www.saccourt.ca.gov</a> and clicking on "View Tentative Rulings." If you do not have access to the internet, call (916) 874-5242 and a clerk will read the tentative ruling to you.

## If the ruling indicates:

- Your change of name is **granted**, the Courtroom Clerk will mail you the signed *Decree Changing Name and Gender* form (NC-230) or *Order for Change of Gender and Issuance of New Birth Certificate* form (NC-330) that you submitted to the address provided on your document. You do not need to appear.
- Your **appearance is required**, you must appear at the date, time and department indicated on your *Order to Show Cause for Change of Name* form (NC-220) or *Setting of Hearing on Petition for Change of Gender and Issuance of New Birth Certificate* form (NC-320). If a hearing is required, the judge will determine whether or not to grant your petition. If granted, the Courtroom Clerk will mail you the signed *Decree Changing Name and Gender* form (NC-230) or *Order for Change of Gender and Issuance of New Birth Certificate* form (NC-330) that you submitted to the address provided in your document.
- **d. DECREE:** Certified copies of the decree may be purchased for a fee after the hearing.

		CM-010
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State B	ar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.:	FAX NO.:	
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
CASE NAME:		
CIVIL CASE COVER SHEET	Complex Case Designation	CASE NUMBER:
Unlimited Limited (Amount (Amount	Counter Joinder	
demanded demanded is	Filed with first appearance by defe	ndant JUDGE:
exceeds \$25,000) \$25,000 or less		,
	elow must be completed (see instruction	s on page 2).
Check one box below for the case type the Auto Tort	eat best describes this case:  Contract	Provisionally Complex Civil Litigation
Auto (22)	Breach of contract/warranty (06)	(Cal. Rules of Court, rules 3.400–3.403)
Uninsured motorist (46)	Rule 3.740 collections (09)	Antitrust/Trade regulation (03)
Other PI/PD/WD (Personal Injury/Property	Other collections (09)	Construction defect (10)
Damage/Wrongful Death) Tort Asbestos (04)	Insurance coverage (18)	Mass tort (40)
Product liability (24)	Other contract (37)	Securities litigation (28)
Medical malpractice (45)	Real Property  Eminent domain/Inverse	Environmental/Toxic tort (30) Insurance coverage claims arising from the
Other PI/PD/WD (23)	condemnation (14)	above listed provisionally complex case
Non-PI/PD/WD (Other) Tort	Wrongful eviction (33)	types (41)
Business tort/unfair business practice (0	•	Enforcement of Judgment Enforcement of judgment (20)
Civil rights (08)  Defamation (13)	Uniawful Detainer  Commercial (31)	, , ,
Fraud (16)	Residential (32)	Miscellaneous Civil Complaint  RICO (27)
Intellectual property (19)	Drugs (38)	Other complaint (not specified above) (42)
Professional negligence (25)	Judicial Review	Miscellaneous Civil Petition
Other non-PI/PD/WD tort (35)	Asset forfeiture (05)	Partnership and corporate governance (21)
Employment (20)	Petition re: arbitration award (11)	Other petition (not specified above) (43)
Wrongful termination (36)  Other employment (15)	Writ of mandate (02) Other judicial review (39)	
		Rules of Court. If the case is complex, mark the
factors requiring exceptional judicial man		, , , , , , , , , , , , , , , , , , ,
a. Large number of separately repr		er of witnesses
b. Extensive motion practice raising		n with related actions pending in one or more courts
issues that will be time-consumit c. Substantial amount of document	_	nties, states, or countries, or in a federal court postjudgment judicial supervision
3. Remedies sought (check all that apply):	a monetary b nonmonetary;	declaratory or injunctive relief cpunitive
<ul><li>4. Number of causes of action (specify):</li><li>5. This case is is is not a classification.</li></ul>	ass action suit.	
6. If there are any known related cases, file		ı mav use form CM-015.)
Date:	(******************************	,,
Date.		
(TYPE OR PRINT NAME)	NOTICE	(SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)
under the Probate Code, Family Code, o	first paper filed in the action or proceed	ing (except small claims cases or cases filed ules of Court, rule 3.220.) Failure to file may result
		ou must serve a copy of this cover sheet on all
other parties to the action or proceeding.     Unless this is a collections case under ru	le 3.740 or a complex case, this cover sl	neet will be used for statistical purposes only.
Form Adopted for Mandatory Use Judicial Council of California	CIVIL CASE COVER SHEET	Cal. Rules of Court, rules 2.30, 3.220, 3.400–3.403, 3.740; Cal. Standards of Judicial Administration, std. 3.10
CM-010 [Rev. July 1, 2007]		www.courtinfo.ca.gov

#### INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET

To Plaintiffs and Others Filing First Papers. If you are filing a first paper (for example, a complaint) in a civil case, you must complete and file, along with your first paper, the Civil Case Cover Sheet contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check one box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the primary cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

To Parties in Rule 3.740 Collections Cases. A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages. (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

To Parties in Complex Cases. In complex cases only, parties must also use the Civil Case Cover Sheet to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a joinder in the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

## **Auto Tort** Auto (22)-Personal Injury/Property Damage/Wrongful Death

Uninsured Motorist (46) (if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto)

#### Other PI/PD/WD (Personal Injury/ Property Damage/Wrongful Death) Tort

Asbestos (04)

Asbestos Property Damage Asbestos Personal Injury/ Wrongful Death Product Liability (not asbestos or

toxic/environmental) (24) Medical Malpractice (45)

Medical Malpractice-

Physicians & Surgeons Other Professional Health Care

Malpractice Other PI/PD/WD (23)

Premises Liability (e.g., slip

and fall)

Intentional Bodily Injury/PD/WD (e.g., assault, vandalism)

Intentional Infliction of

**Emotional Distress** Nealigent Infliction of

**Emotional Distress** Other PI/PD/WD

## Non-PI/PD/WD (Other) Tort

Business Tort/Unfair Business Practice (07)

Civil Rights (e.g., discrimination, false arrest) (not civil

harassment) (08) Defamation (e.g., slander, libel)

(13) Fraud (16)

Intellectual Property (19)

Professional Negligence (25)

Legal Malpractice

Other Professional Malpractice

(not medical or legal)
Other Non-PI/PD/WD Tort (35)

**Employment** 

Wrongful Termination (36) Other Employment (15)

#### **CASE TYPES AND EXAMPLES**

#### Contract Breach of Contract/Warranty (06)

Breach of Rental/Lease

Contract (not unlawful detainer or wrongful eviction)

Contract/Warranty Breach-Seller

Plaintiff (not fraud or negligence)

Negligent Breach of Contract/

Warranty

Other Breach of Contract/Warranty

Collections (e.g., money owed, open

book accounts) (09)

Collection Case-Seller Plaintiff

Other Promissory Note/Collections

Insurance Coverage (not provisionally

complex) (18)

Auto Subrogation

Other Coverage

Other Contract (37)

Contractual Fraud

Other Contract Dispute

## Real Property

**Eminent Domain/Inverse** Condemnation (14)

Wrongful Eviction (33)

Other Real Property (e.g., quiet title) (26)

Writ of Possession of Real Property

Mortgage Foreclosure

**Quiet Title** 

Other Real Property (not eminent

domain, landlord/tenant. or

#### foreclosure) **Unlawful Detainer**

Commercial (31)

Residential (32)

Drugs (38) (if the case involves illegal drugs, check this item; otherwise,

report as Commercial or Residential)

## **Judicial Review**

Asset Forfeiture (05)

Petition Re: Arbitration Award (11)

Writ of Mandate (02)
Writ-Administrative Mandamus Writ-Mandamus on Limited Court

Case Matter

Writ-Other Limited Court Case

Review

Other Judicial Review (39) Review of Health Officer Order

Notice of Appeal-Labor

Commissioner Appeals

#### Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400-3.403)

Antitrust/Trade Regulation (03)

Construction Defect (10)

Claims Involving Mass Tort (40)

Securities Litigation (28)

Environmental/Toxic Tort (30)

Insurance Coverage Claims (arising from provisionally complex

case type listed above) (41)

## **Enforcement of Judgment**

Enforcement of Judgment (20)

Abstract of Judgment (Out of County)

Confession of Judgment (non-

domestic relations)

Sister State Judgment

Administrative Agency Award

(not unpaid taxes)

Petition/Certification of Entry of

**Judgment on Unpaid Taxes** 

Other Enforcement of Judgment Case

## Miscellaneous Civil Complaint

**RICO (27)** 

Other Complaint (not specified

above) (42)

Declaratory Relief Only Injunctive Relief Only (non-

harassment)

Mechanics Lien

Other Commercial Complaint

Case (non-tort/non-complex)

Other Civil Complaint

(non-tort/non-complex)

#### Miscellaneous Civil Petition Partnership and Corporate

Governance (21)

Other Petition (not specified

above) (43)

Civil Harassment

Workplace Violence

Elder/Dependent Adult Abuse

**Election Contest** 

Petition for Name Change

Petition for Relief From Late

Claim

Other Civil Petition

АТ	TORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): STATE BAR NO:	
NA	ME:	
FIF	RM NAME:	
ST	REET ADDRESS:	
CIT	Y: STATE: ZIP CODE:	
TE	LEPHONE NO.: FAX NO. :	
E-N	MAIL ADDRESS:	
AT	TORNEY FOR (Name):	
SI	UPERIOR COURT OF CALIFORNIA, COUNTY OF	
s	TREET ADDRESS:	
M	IAILING ADDRESS:	
Ci	TY AND ZIP CODE:	
	BRANCH NAME:	
P	ETITION OF (Name):	
L		
	DETITION FOR CHANGE OF NAME AND CENTER	CASE NUMBER:
	PETITION FOR CHANGE OF NAME AND GENDER	
_		
	Before you complete this petition, you should read the Instructions for Filing a Petition for page. You must answer all questions and check all boxes that apply to you on this petition	Change of Name and Gender on the next You must file this petition in the superior
_	court of the county where the person whose name is to be changed resides.	
1.	Petitioner (present name):	is a resident of this county.
2.	Petitioner requests that the court decree that petitioner's name is changed to (proposed	d name):
		•
	The state of the s	
3.	Petitioner requests a decree that the petitioner's gender is changed:	
	a. from male to female.	
	b. from female to male.	
4.	An affidavit or a declaration of a physician documenting the gender change through clin	nically appropriate treatment as provided
	under Health and Safety Code sections 103425 and 103430 is attached to this petition	. (Declaration of Physician (form NC-210)
	may be used for this purpose.)	
5.	Petitioner requests that the court order that a new birth certificate be issued reflecting to	he gender and name changes sought by
•	this petition.	
	·	
6	Petitioner requests that the court issue an order directing all interested persons to appe	ear and show cause why the petition for
٥.	change of name should not be granted.	• •
	onango o mano oncesso o granda	
7	Petitioner provides the following information in support of this petition:	
٠.	Tourist provides the remaining annual surprise and the su	
	ment of the state	
	<ul> <li>The information contained in the physician's affidavit or declaration.</li> </ul>	
	b-f. The information contained in the attachment (attach a completed copy of the atta	chment Name and Information About
	the Person Whose Name Is to Be Changed (form NC-110)).	

#### INSTRUCTIONS FOR FILING A PETITION FOR CHANGE OF NAME AND GENDER

#### 1. Where to File

The petition for change of name and gender must be filed in the superior court in the county where the petitioner presently lives.

#### 2. Whose Name May Be Changed

The petition may be used to change one's name and gender.

#### 3. What Forms Are Required

You need an original and two copies of each of the following documents:

- a. Petition for Change of Name and Gender (form NC-200)
- b. Name and Information About the Person Whose Name Is to Be Changed (Attachment to Petition) (form NC-110)
- c. Declaration of Physician (form NC-210) (signed by the physician and attached to form NC-200)
- d. Order to Show Cause for Change of Name (form NC-220)
- e. Decree Changing Name and Gender (form NC-230)

#### 4. Filing and Filing Fee

Prepare an original Civil Case Cover Sheet (form CM-010). File the original petition and Civil Case Cover Sheet with the clerk of the court and obtain two filed-endorsed copies of the petition. A filing fee will be charged unless you qualify for a fee waiver. (If you want to apply for a fee waiver, see Request to Waive Court Fees (form FW-001) and Information Sheet on Waiver of Court Fees and Costs (form FW-001–INFO).)

#### 5. Requesting a Court Hearing Date

You should request a date for the hearing on the Order to Show Cause at least six weeks in the future.

#### 6. Filing the Order to Show Cause

After the hearing date has been included and you have obtained a judge's signature on the *Order to Show Cause*, file the original order in the clerk's office and obtain filed-endorsed copies of the order.

## 7. Domestic Violence Confidentiality Program

In cases where the petitioner is a participant in the state address confidentiality program (Safe at Home), the petition, the order to show cause, and the decree should, instead of giving the proposed name, indicate that the name is confidential and on file with the Secretary of State. See *Information Sheet for Name Change Proceedings Under Address Confidentiality Program* (Safe at Home) (form NC-400-INFO).

#### 8. Court Hearing

Bring copies of all documents to the hearing. If the judge grants the name and gender change petition, the judge will sign the original decree.

#### 9. Birth Certificate

To obtain a new birth certificate reflecting the change of gender, file a certified copy of the order within 30 days with the Secretary of State and the State Registrar and pay the applicable fees. You may write or contact the State Registrar at:

California Department of Public Health
Vital Records – MS 5103
P.O. Box 997410
Sacramento, CA 95899-7410

Phone: 916-445-2684 Website: www.cdph.ca.gov

Local courts may supplement these instructions. Check with the court to determine whether supplemental information is available. For instance, the court may provide you with additional written information identifying the department that handles name and gender change petitions, and the times when petitions are heard.

			NC-220
PETITIONER OR ATTORNEY (Name, State Bar number, and address):	STATE BAR NO:		
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO.:	FAX NO.:		
E-MAIL ADDRESS:			
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	*		7
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PETITION OF (Name of petitioner):			
	FOR CHANGE	OF NAME AND OFNIDED	
	FOR CHANGE	OF NAME AND GENDER	CASE NUMBER:
ORDER TO SHOW CAUSE FO	OR CHANGE	OF NAME	CASE NUMBER.
<ol> <li>Petitioner (present name):     decree changing petitioner's name to (propose)</li> <li>THE COURT ORDERS that all persons interestow cause, if any, why the petition should not be a second or the course.</li> </ol>	ested in this ma ot be granted.	atter shall appear before th	has filed a petition with this court for a
a. Date:	ne:	Dept.:	Room:
u. 54.6.			
<ul><li>b. The address of the court is same as</li><li>3. Other (specify):</li></ul>	s noted above	other (specify):	
Date:			JUDGE OF THE SUPERIOR COURT

PETITIONER OR ATTORNEY (Name, state bar number, and address):		FOR COURT USE ONLY
<u>_</u>		
TELEPHONE NO.: FAX NO. (Optional):		
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITION OF (Name of petitioner):		
FOR CHANCE OF MA	ME AND CENDED	
FOR CHANGE OF NA	CASE NUMBE	ED.
DECREE CHANGING NAME AND GENDER	CASE NUMBE	ER.
The petition came regularly for hearing on (date):	in Courtroom:	of the above-entitled court.
The petition came regularly for healing on (date).	iii Courticom.	of the above-entitled court.
THE COURT FINDS		
a. All notices required by law have been given.		
b. Each person whose name is to be changed identified in item 3 bel	ow	
(1) is not is under the jurisdiction of the Departmen		
(2) is not is required to register as a sex offender u		Code.
These determinations were made  by using CLETS/CJIS		provided to the clerk of the
court by a local law enforcement agency.		
c. No objections to the proposed change of name were made.		
d. Objections to the proposed change of name were made by (	name):	
e. It appears to the satisfaction of the court that all the allegations in	the petition are true and suffici-	ent and that the petition should
be granted.		
f Other findings (if any):		
THE COURT ORDERS		
3. The name of (present name):		
is changed to (new name):		
is changed to (new harne).		
THE COURT FURTHER ORDERS		
4. The gender of (new name):		
is changed:		
a. from male to female.		
b. from female to male.		
THE COURT FURTHER ORDERS		
5. A new birth certificate shall be issued reflecting the changes in name	and gender.	
Date:		
-	JUDGE OF THE	SUPERIOR COURT
	SIGNATURE OF JUDGE FOLLOWS	LAST ATTACHMENT

	NC-110
PETITION OF (Name of petitioner or petitioners):	CASE NUMBER:
FC	OR CHANGE OF NAME
NAME AND INFORMATIO	N ABOUT THE PERSON
WHOSE NAME IS T Attachment to <i>Petition</i> (form	
(You must use a separate attachment for each person whose name supplemental attachment, Declaration of Guardian (form NC-110G), is to be changed.)	
7. (Continued) Petitioner applies for a decree to change the name o	f the following person:
(1) Present name (specify):	
<ul><li>(2) Proposed name (specify):</li><li>(3) Born on (date of birth):</li></ul>	
and presently under 18 years of age of	ver 18 years of age
<ul><li>(4) Born at (place of birth):</li><li>(5) Sex (as stated on original birth certificate): Male</li></ul>	Fernale
(6) Current residence address (street, city, county, and zip c	
c. Reason for name change (explain):	
d. Relationship of the petitioner to the person whose name will b	e changed:
(1) self (4) near relative (indication)	te relationship):
(2) parent (5) Other (specify):	
e. If the person whose name will be changed is under 18 years of following persons:	of age, provide the names and addresses, if known, of the
(1) Father (name): (addr	•
<ul> <li>(2) Mother (name): (addr</li> <li>(3) (Only if neither parent is living) Near relatives (names, re</li> </ul>	•
(c) (city it rotates parent to itsning) from to dates (riamos, re	idustrialinpo, diria dada ososooj.
f. If the person whose name will be changed is 18 years of age	or older, that person must sign the following declaration:
DECLAR	ATION
I declare under penalty of perjury under the laws of the State of jurisdiction of the California Department of Corrections (in state required to register as a sex offender under Penal Code section	prison or on parole) and I am not I am
Date:	<b>L</b>
(TYPE OR PRINT NAME OF PERSON WHOSE NAME IS TO BE CHANGED)	(SIGNATURE OF PERSON WHOSE NAME IS TO BE CHANGED)
(If petitioner is represented by an attorney, the attorney's signat	ure follows):
Date:	<b>&gt;</b>
(TYPE OR PRINT NAME)	(SIGNATURE OF ATTORNEY)
(Each petitioner must sign this petition in the space provided be attachment.) I declare under penalty of perjury under the laws of the true and correct.	
Date:	
	<b>•</b>
(TYPE OR PRINT NAME)	(SIGNATURE OF PETITIONER)
Date:	•
(TYPE OR PRINT NAME)	(SIGNATURE OF PETITIONER)
	SIGNATURE OF RETITIONERS FOLLOWS LAST ATTACK

			NC-30	00
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State B	Bar number, and address): STATE BAR NO:			
NAME:		İ		
FIRM NAME:				
STREET ADDRESS:				
CITY:	STATE: ZIP CODE:			
TELEPHONE NO.:	FAX NO.:	Ì		
E-MAIL ADDRESS:				
ATTORNEY FOR (Name):				
SUPERIOR COURT OF CALIFORNIA, COUNT	Y OF			
STREET ADDRESS:				
MAILING ADDRESS:		l		
CITY AND ZIP CODE:				
BRANCH NAME:				
PETITION OF (Name):				
			0.05 111155	_
	OF GENDER AND ISSUANCE		CASE NUMBER:	
OF NEW BIRT	TH CERTIFICATE		L	_
				_
Before you complete this petition, you should a court order in order for the State Registrar t section 103426.	d read the instructions on the next pay to issue a new birth certificate reflecti	ge. Note that ing a change	t you do not need to file this petition or obtain of gender. See Health and Safety Code	' 
Petitioner (name):     certificate reflecting the change of petition	oner's gender	req	uests an order for the issuance of a new bir	th
a. from male to female.				
b. from female to male.				
<ol> <li>A declaration by a physician documenting Safety Code sections 103425 and 1034 Petition (form NC-310).)</li> </ol>	ng the gender change through clinic is 30 is filed with this petition. (Attach	ally appropr a copy of Do	riate treatment as provided under Health an eclaration of Physician—Attachment to	d
Petitioner has has not change of name, attach a certified copy		nge of name	e. (If petitioner has obtained a decree of	
<ol> <li>Petitioner requests that the court issue any other person having knowledge of f</li> </ol>	an order setting a hearing on this pe facts relevant to the petition.	etition at whi	ich the court may examine petitioner and	
I declare under penalty of perjury under the	laws of the State of California that t	the informat	ion above is true and correct.	
	•			
(TYPE OR PRINT NAME OF PETITIONER)			(SIGNATURE OF PETITIONER	•
THE STATE OF PERMISSION				

# INSTRUCTIONS FOR FILING PETITION FOR CHANGE OF GENDER AND ISSUANCE OF NEW BIRTH CERTIFICATE

(This instruction page is for the information of petitioner seeking a court order. It is not part of the petition and does not need to be filed.)

#### 1. Where to File

The petition for a court order for the issuance of a new birth certificate reflecting a change in gender may be filed in the superior court of any county in California. Note that you do not need to file this petition or obtain a court order in order for the State Registrar to issue a new birth certificate reflecting a change of gender. See Health and Safety Code section 103426. You may make the request directly to the State Registrar at the California Department of Public Health. (See contact information below.)

#### 2. What Forms Are Required

You will need an original and a copy of each of the following documents:

- a. Petition for Change of Gender and Issuance of New Birth Certificate (form NC-300)
- b. Declaration of Physician—Attachment to Petition (form NC-310) (signed by the physician and attached to form NC-300)
- c. Setting of Hearing on Petition for Change of Gender and Issuance of New Birth Certificate (form NC-320)
- d. Order for Change of Gender and Issuance of New Birth Certificate (form NC-330)

In addition, if you have already obtained a decree of change of name, attach a certified copy of the decree to the petition.

## 3. Filing Fee

Prepare an original *Civil Case Cover Sheet* (form CM-010). File the original petition and *Civil Case Cover Sheet* with the clerk of the court and obtain a filed-endorsed copy of the petition. A filing fee will be charged unless you qualify for a fee waiver. (If you want to apply for a fee waiver, see *Request to Waive Court Fees* (form FW-001) and *Information Sheet on Waiver of Superior Court Fees and Costs* (form FW-001–INFO).)

#### 4. Requesting a Court Hearing Date

You should request a date for the hearing on the Setting of Hearing on Petition for Change of Gender and Issuance of New Birth Certificate (form NC-320) from the court clerk. Take the completed form NC-320 to the clerk's office. The clerk will provide the hearing date and location, file the original, and give you a copy.

#### 5. Court Hearing

Bring copies of all documents to the hearing. If the judge grants the petition, the judge will sign the *Order for Change of Gender and Issuance of New Birth Certificate* (form NC-330).

## 6. New Birth Certificate

To obtain a new birth certificate reflecting the change of gender, file a certified copy of the order within 30 days with the State Registrar and pay the applicable fees. You may write or contact the State Registrar at:

California Department of Public Health
Vital Records – MS 5103
P.O. Box 997410
Sacramento, CA 95899-7410

Phone: 916-445-2684 Website: www.cdph.ca.gov

Local courts may supplement these instructions. Check with the court to determine whether supplemental information is available. For instance, the court may provide you with additional written information identifying the department that handles these petitions and the times when petitions are heard.

	NC-210/NC-
PETITION OF (Name):	CASÉ NUMBER:
DECLARATION	Page of _
DOCUMENTING CHANGE OF GENDER THROUGH	
UNDER HEALTH AND SAFETY COD	
achment to <i>Petition for Change of Name and Gender</i> (form NC-20 rtificate (form NC-300)	0) or Petition for Change of Gender and Issuance of New Birth
declare under penalty of perjury under the laws of the State of Ca	alifornia that the information in the foregoing declaration is true
Date:	
	•
(TYPE OR PRINT NAME OF PHYSICIAN)	(SIGNATURE OF PHYSICIAN)

ATTORNEY OF PARTY MITHOUT ATTORNEY (M		NC-32
ATTORNEY OR PARTY WITHOUT ATTORNEY (N	ame, State Bar number, and address):	FOR COURT USE ONLY
<u> </u>		
TELEPHONE NO.:	FAX NO.:	
E-MAIL ADDRESS:	TO THE	
ATTORNEY FOR (Name):		
	COUNTY OF	_
SUPERIOR COURT OF CALIFORNIA STREET ADDRESS:	COUNTY OF	
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITION OF (Name):		_
, Comment		
	ON PETITION FOR CHANGE OF GENDER E OF NEW BIRTH CERTIFICATE	CASE NUMBER:
Petitioner having filed a petition red gender, a hearing will take place a person having knowledge of facts	questing an order for the issuance of a new birth certif t the time and place below, at which time the court ma relevant to this petition.	icate reflecting the change of petitioner's ay examine the petitioner and any other
	(To be completed by clerk.)	
a. Date:	Time: De	pt.: Room:
a. Date: b. The address of the court is	same as noted above other (specify):	pt.: Room:

	NC-330
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
<u>_</u>	
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITION OF (Name):	
, ,	
ORDER FOR CHANGE OF GENDER AND ISSUA	CASE NUMBER:
OF NEW BIRTH CERTIFICATE	NOL
1. The petition of (name):	for issuance of a new birth certificate
reflecting a change of gender came on regularly for hearing on <i>(date</i>	
THE COURT FINDS	
<ol><li>a. It appears to the satisfaction of the court that all the allegations is should be granted.</li></ol>	the petition are true and sufficient and that the petition
b. Other findings (if any):	
THE COURT ORDERS	
<ol><li>The gender of the petitioner has been changed</li></ol>	
a. from male to female.	
b. from female to male.	
THE COURT FURTHER ORDERS	
<ol> <li>A new birth certificate reflecting the change of gender described in i</li> </ol>	
<ol><li>A certified copy of this order shall be filed within 30 days with the St certified copy of this order and payment of the applicable fees, the S birth certificate reflecting the gender of the petitioner as it has been</li></ol>	State Registrar shall establish for the petitioner a new
Date:	•
_	JUDICIAL OFFICER



# Sacramento County Newspapers of General Circulation

NEWSPAPER NAME	ADDRESS	WEBSITE	PHONE	FAX	FILE DEADLINE DATE	FILE PROOF
Carmichael Times	7144 Fair Oaks Blvd., Suite 5 Carmichael, CA 95608	www.carmichaeltimes.com	916-483-2299	916-773-2999	Thursday 5:00 PM for publication on following Wednesday	Yes via mail; an unendorsed copy will be sent to client.
Elk Grove Citizen	8970 Elk Grove Blvd. Elk Grove, CA 95624	www.egcitizen.com	916-685-5533	209-745-4492	Noon on Monday for Wednesday publication. Noon on Wednesday for Friday publication	No, client must pick up their proof and file it with the court prior to hearing date.
Folsom Telegraph	921 Sutter St. Folsom, CA 95630	www.folsomtelegraph.com	916-985-2581	916-985-0720	Thursday12:00 PM for the following Wednesday	Yes.
Galt Herald	P.O. Box 307 604 Lincoln Way Galt, CA 95632	www.galtheraldonline.com	209-745-1551	209-745-4492	Tuesday 12:00 PM	No, client must pick up their proof and file it with the court prior to hearing date.
Grapevine	7144 Fair Oaks Blvd., Suite 5	www.ranchocordovaindepe	916-773-1111	916-773-2999	Tuesday 5:00 PM for	Yes.
Independent	Carmichael, CA 95608	<u>ndent.com</u>			Friday publication	
Rio Linda	PO Box 419	www.obri.net/rlenews	916-991-3000	N/A	Monday 5:00 PM for	Yes via mail, an
Elverta News	309 Savoy Avenue				Friday publication	unendorsed copy will
and Printing	Rio Linda, CA 95673					be sent to client.
Sacramento Bee Newspaper	Location: 2100 Q Street Sacramento, CA 95816 Mailing: PO Box 151779 Sacramento, CA 95852	www.sacbee.com	916-321-1371	916-321-1110	Wednesday for Friday publication	Contact Sacramento Bee
Spectrum Newspaper	530 Bercut Drive, Suite E Sacramento, CA 95814	N/A	916-445-6825	916-443-5871	Thursday 9:00 AM for Tuesday publication	Yes
The Daily Recorder	901 H Street, Room 312 Sacramento, CA 95814	N/A	916-444-2355 X102	N/A	Two business days prior to publication	Yes.
The Sacramento Bulletin	530 Bercut Drive, Suite E Sacramento, CA 95814	N/A	916-445-6825	916-443-5871	Two business days prior to publication	Yes.
The Sacramento Gazette Newspaper	770 L Street, Suite 950 Sacramento, CA 95814	www.sacgazette.com	916-567-9654	888-567-1193	Tuesday 12:00 PM	Yes.
The Sacramento Observer	2330 Alhambra Blvd. Sacramento, CA 95817	<u>www.sacobersver.com</u>	916-452-4781	N/A	Wednesday 5:00 PM for Friday publication	Yes.

Sacramento Superior Court does not endorse any of the above newspapers. This information is provided for reference only.