



SUPERIOR COURT OF CALIFORNIA
COUNTY OF SACRAMENTO

720 NINTH STREET – ROOM 102

SACRAMENTO, CA 95814-1380

(916) 874-5522 – WWW.SACCOURT.CA.GOV

CONFIDENTIAL

Name Change Criminal History Addendum

(Addendum to Request for Name and/or Gender Change)

This form will be kept confidential by the Clerk of the Court.

Case Number: _____

Full Name: _____

Also Known As: _____

Social Security Number: _____

Driver's License or ID Number: _____

Date of Birth: _____ Age: _____

Sex: (as stated on Original Birth Certificate) Male: _____ or Female: _____

Current Residence Address: (Street, City, County, and Zip Code):
