Clerk of the Supreme Court, Court of Appeals, and Tax Court
STATE OF INDIANA

ROLL OF ATTORNEYS INFORMATION

AFFIDAVIT FOR NAME CHANGE

1. My current name and bar number for the Indiana Supreme Court Roll of Attorneys:

FIRST: **MIDDLE:** **LAST:**

BAR NUMBER:	

2. Date of Marriage:		**STATE:**		**COUNTY:**	

3. My new legal name (which is how my name will appear on the Indiana Supreme Court – Roll of Attorneys):

FIRST: **MIDDLE:** **LAST:**

Attached is a copy of my driver's license or Social Security card showing the new name.

VERIFICATION

I SWEAR OR AFFIRM, UNDER PENALTIES FOR PERJURY, THAT THE FOREGOING STATEMENTS ARE TRUE.

DATE: **SIGNATURE:**

THIS FORM MAY NOT BE FAXED. AN ORIGINAL SIGNATURE MUST BE RECEIVED BY THE CLERK'S OFFICE.

Clerk of the Supreme Courts
Attn: Roll of Attorneys
402 West Washington Street, Room W062
Indianapolis, IN 46204