

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

In the interest of \_\_\_\_\_  
(pseudonym or initials of minor)

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

**SWORN STATEMENT OF TRUE NAME AND PSEUDONYM**

NOTICE TO THE CLERK OF COURT: A CERTIFIED COPY OF THIS DECLARATION WITH THE CASE NUMBER NOTED ON IT SHALL BE GIVEN TO THE MINOR AFTER SHE SIGNS IT.

THE ORIGINAL SHALL IMMEDIATELY BE PLACED IN A SEALED ENVELOPE WHICH SHALL BE FILED UNDER SEAL AND KEPT UNDER SEAL AT ALL TIMES.

(1) My true name is \_\_\_\_\_, and my address is  
(print your name)

\_\_\_\_\_  
(print your address)

(2) My date of birth is \_\_\_\_\_.

(3) I have filed a Petition for Judicial Waiver of Parental Notice of Termination of Pregnancy under the name or initials \_\_\_\_\_ on \_\_\_\_\_  
(date)

I understand that by signing this form I am swearing to or affirming the truthfulness of the information herein and that the punishment for knowingly making a false statement includes fines, imprisonment or both.

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_  
(You must sign your true name.)