



OFFICE OF THE LIEUTENANT GOVERNOR

Ke Ke'ena O Ka Hope Kia'āina
State Capitol, Fifth Floor
Honolulu, Hawaii 96813
Phone: (808) 586-0255
email: ltgov.contact@hawaii.gov
www.hawaii.gov/ltgov

SYLVIA LUKE
LIEUTENANT GOVERNOR

Name Change Record Order Form

Name (First, Last)

Address

City/State Zipcode

Email

Phone Date

Relationship to Petitioner

Former Name (First, Last)

Name after Change (First, Last)

Date of Order

Request Certified Copy of Order (\$2 Per Copy): Quantity

Make check(s) or money order(s) payable to the Office of the Lieutenant Governor. Mail the complete and signed form, with payment, to:
Office of the Lieutenant Governor 415 S. Beretania 5th Floor, Honolulu Hawaii 96813

Signature

To request a copy of the petition and fact sheet please call us at
(808) 586-0255 or email us at ltgov.help@hawaii.gov