

Wisconsin Department of Justice Change of Name Notification

OF THE ATTORNIST OF						
Change of Name: You must notify the Department of Justice (DOJ) of any name change no later than 30 days after the change. The Department of Justice is required to conduct a new background check pursuant to Jus 17.08 (2).			ation Number	· ·	Jse Only)	
Fees: You must include a check in the amount of \$22 made payable to the Wisconsin Department of Justice which includes the background check and replacement license fee pursuant to Jus 17.08 (3).				(DOJ L	Jse Only)	
	fy the Department of Transportation of the oto identification will match the name on your					
Instructions						
Complete the licensee information below as it appears on your license.						
Enter your new legal name.						
• You must include a check in the amount of \$22 made payable to the Wisconsin Department of Justice for the background check and re-placement license pursuant to Jus 17.08 (3).			nse Number	(DO	Use Only)	
			Number	(DO	Use Only)	
 Mail completed form to: Wisconsin Department of Justice Attn: Firearms Unit P.O. Box 7130 Madison, WI 53707-7130 			Date Updated		Use Only)	
A new license will be mailed to you.			Operator (DOJ Use Only)			
	LICENSEE INFORMATION					
* * * En	ter as it appears on your concealed carry	y licens	e * * *	_ _		
Concealed Carry License Number:			Date of Birth:			
Last Name:	First Name:	Middle N	lame or Initial:	Suffix:	Suffix:	
	CHANGE OF NAME NOTIFICATION	ON				
Enter your complete new legal name below						
Last Name:	First Name:	Middle N	lame or Initial:	Suffix:		
New Wisconsin Drivers License Number:				1		
	nd complete to the best of my knowledge. I understand I may be prosecute mprisonment of up to 9 months, or both [s. 946.32(2), Wis. Stats.] and for					

up to 9 months, or both [s. 943.38, Wis. Stats.]

X		
	Signature of licensee	Date