

CHANGE OF ADDRESS
CAMBIO DE DOMICILIO

COURT #: _____
(NUMERO DE CORTE #)

CASE#: _____
(NUMERO DE CASE#)

DEFENDANT NAME: _____
(NOMBRE DEL ACUSADO)

DEPOSITOR: _____

OLD ADDRESS: _____
(DOMICILIO ANTERIOR)

NEW ADDRESS: _____
(DOMICILIO ACTUAL)

TELEPHONE: _____
(TELEFONO)

DRIVER'S LICENSE NO. OR PICTURE ID NO: _____
(NUMERO DE LICENCIA DE MANEJAR O IDENTIFICACION CON FOTO)

SIGNATURE OF DEPOSITOR
(FIRMA DEL DEPOSITOR)

KAREN C. MATKIN, DISTRICT CLERK

RECEIVED BY: _____
DEPUTY DISTRICT CLERK

