

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> <hr style="width: 10%; margin-left: 0;"/> TELEPHONE NO.: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER: JUDICIAL OFFICER:
NOTICE OF CHANGE OF ADDRESS	DEPT.:

1. **Please take notice** that, as of *(date)*:

- the following party or
- the attorney for:
 - a. plaintiff *(name)*:
 - b. defendant *(name)*:
 - c. petitioner *(name)*:
 - d. respondent *(name)*:
 - e. other *(describe)*:

has **changed his or her address** for service of notices and documents in the above-captioned action.

A list of additional parties represented is provided in Attachment 1.

2. The **new address** of *(name)*:

is as follows:

- a. Street:
- b. City:
- c. Mailing address *(if different from above)*:
- d. State and zip code:
- e. Telephone number:
- f. Fax number *(optional)*:
- g. E-mail address *(optional)*:

3. **All notices and documents** regarding the action should be sent to the above address.

Date:

(TYPE OR PRINT NAME)

▶

(SIGNATURE OF PARTY OR ATTORNEY)

PLAINTIFF:	CASE NUMBER:
DEFENDANT:	

**PROOF OF SERVICE BY FIRST-CLASS MAIL
NOTICE OF CHANGE OF ADDRESS**

(NOTE: You cannot serve the Notice of Change of Address if you are a party in the action. The person who served the notice must complete this proof of service.)

1. I am at least 18 years old and **not a party to this action**. I am a resident of or employed in the county where the mailing took place, and my residence or business address is *(specify)*:

2. I served a copy of the *Notice of Change of Address* by enclosing it in a sealed envelope with postage fully prepaid and *(check one)*:

a. deposited the sealed envelope with the United States Postal Service.

b. placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.

3. The *Notice of Change of Address* was mailed:

a. on *(date)*:

b. from *(city and state)*:

4. The envelope was addressed and mailed as follows:

a. Name of person served:	c. Name of person served:
Street address:	Street address:
City:	City:
State and zip code:	State and zip code:
b. Name of person served:	d. Name of person served:
Street address:	Street address:
City:	City:
State and zip code:	State and zip code:

Names and addresses of additional persons served are attached. *(You may use form POS-030(P).)*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____  _____
 (TYPE OR PRINT NAME OF DECLARANT) (SIGNATURE OF DECLARANT)