LIVINGSTON COUNTY FRIEND OF THE COURT

210 S. Highlander Way Suite 3 Howell, MI 48843 **Ph:** (877)543-2660 **Fax:** (517) 552-2312

ADDRESS CHANGE

Name: _____ **Social Security No**: _____

File/Case No: _____

Opposite Party's Name: _____

Your Old Address: _____

_____

_____

New Legal Address: _____

_____

_____

IN ORDER TO COMPLY WITH MICHIGAN COURT RULES THIS OFFICE NEEDS TO KNOW THE STREET NAME AND NUMBER OF YOUR RESIDENCE EVEN IF YOUR MAIL IS DELIVERED TO A POST OFFICE BOX

*****LEGAL AND MAILING ADDRESS MUST MATCH*****

Mailing: _____ **Residential**: _____

_____ _____

_____ _____

_____ _____

Home Phone No: _____ **Work Phone No**: _____

Email: _____ _____

Signature: _____

Date: _____