



Gila County Justice Courts, State of Arizona

CASE NUMBER: _____

Plaintiff(s) Name / Address / Phone

Defendant(s) Name / Address / Phone

Attorney for Plaintiff(s) Name / Address / Phone

Attorney for Defendant(s) Name / Address / Phone

NOTICE of CHANGE OF ADDRESS

! If your address is protected by Court Order, DO NOT use this form

I am the Plaintiff Defendant in this action.

I hereby notify the court and all parties to this action that my address has changed.

My OLD address is:

Name: (Please print)		
Address:		
City:	State:	Zip Code:
Telephone Number:		

My NEW address is:

Name: (Please print)		
Address:		
City:	State:	Zip Code:
Telephone Number:		

Date: _____

Plaintiff Defendant

I CERTIFY that I mailed / delivered a copy of this NOTICE OF ADDRESS CHANGE to:			
<input type="checkbox"/> Plaintiff at the above address	<input type="checkbox"/> Plaintiff's attorney	<input type="checkbox"/> Defendant at the above address	<input type="checkbox"/> Defendant's attorney
Date: _____	By: _____		
	<input type="checkbox"/> Plaintiff	<input type="checkbox"/> Defendant	