

****FORM NEEDS TO BE BROUGHT TO CLERK OF COURTS OFFICE****

CHANGE OF ADDRESS

My name is: _____

My Case number(s) is/are:

Date of Birth _____

SSN# _____

My New **Mailing** address is

House number _____

Street _____

City _____

State _____

Zip Code _____

Phone Number _____

I gave written notice of my new address to:

(Circle the Letter)

- A. Luzerne County District Attorney office
- B. Adult Probation
- C. My attorney
- D. Bail bondsman

Print your name _____

Sign your name _____

Date _____

ENTERED BY CLERK OF COURT STAFF: _____