

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

**Check your email.** You will receive information and documents at this email address.

\_\_\_\_\_  
Email

I am  Petitioner  Respondent  
 Petitioner's Attorney  Respondent's Attorney (Utah Bar #: \_\_\_\_\_)  
 Petitioner's Licensed Paralegal Practitioner  
 Respondent's Licensed Paralegal Practitioner (Utah Bar #: \_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

In the Matter of (select one)

- the Marriage of (for a divorce with or without children, annulment, separate maintenance, or temporary separation case)
- the Children of (to establish custody, parent-time or child support)
- the Parentage of the Children of (for a paternity case)

\_\_\_\_\_  
(name of Petitioner)

and

\_\_\_\_\_  
(name of Respondent)

\_\_\_\_\_  
Other parties (if any)

**Notice of Change of Address and/or Contact Information**

\_\_\_\_\_  
Case Number

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Commissioner (domestic cases)

I am the  Plaintiff/Petitioner  Defendant/Respondent

Please take notice that my address and/or contact information has changed. My new address and contact information are:

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Address

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City, State, Zip

---

Phone

---

Email

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

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Date

Signature ►

Printed Name

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Notice of Change of Address and/or Contact Information on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
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\_\_\_\_\_ Signature ► \_\_\_\_\_  
 Date \_\_\_\_\_ Printed Name \_\_\_\_\_