

<b>STATE OF MICHIGAN PROBATE COURT COUNTY OF OAKLAND</b>	<input type="checkbox"/> <b>CHANGE OF NAME</b> <i>(Interested Party)</i>  <input type="checkbox"/> <b>CHANGE OF ADDRESS</b>	<b>File No.</b>
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In the matter of \_\_\_\_\_

NAME: \_\_\_\_\_

NEW NAME: \_\_\_\_\_

OLD ADDRESS: \_\_\_\_\_  
Street address, apartment/suite#

NEW ADDRESS: \_\_\_\_\_  
Street address, apartment/suite#

\_\_\_\_\_  
City, state, zip code Phone number

**PLEASE CHECK APPROPRIATE DESIGNATION:**

FIDUCIARY \_\_\_\_\_ OTHER PARTY OF INTEREST \_\_\_\_\_

WARD \_\_\_\_\_

DATE OF NOTIFICATION \_\_\_\_\_

***HOW WAS COURT NOTIFIED?***

MAIL \_\_\_\_\_ TELEPHONE \_\_\_\_\_ COUNTER \_\_\_\_\_

EMAIL \_\_\_\_\_  
*(If by mail, attach notification)*

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Do not write below this line – For court use only

**Filed** \_\_\_\_\_ **20** \_\_\_\_\_

\_\_\_\_\_  
**Deputy Register of Probate**