

STATE OF MICHIGAN PROBATE COURT COUNTY OF SAGINAW	CHANGE OF ADDRESS	CASE NO.
---	--------------------------	----------

In the matter of _____

Full Name: _____

Party Description: _____
Guardian, Conservator, Personal Representative, Petitioner, Etc.

Former Address: _____
Number Street

Apartment/Building/Suite Number

City State Zip

Phone Number

New Address: _____
Number Street

Apartment/Building/Suite Number

City State Zip

Phone Number

Signature

Date

PLEASE SUBMIT THE COMPLETED FORM TO:

Saginaw County Probate Court
111 S. Michigan Avenue – Room 204
Saginaw, Michigan 48602
or Fax:
(989) 790-5328

Do not write below this line – For court use only