

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar Number and Address):</i>  TELEPHONE NUMBER: _____ FAX NUMBER <i>(Optional)</i> : _____ EMAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	FOR COURT USE ONLY
<p style="text-align: center;"><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b></p> COURT ADDRESS: 191 North First Street MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH NAME: Downtown Courthouse – Court Investigations Unit	
<input type="checkbox"/> <b>Conservatorship of <i>(Name)</i>:</b>  <input type="checkbox"/> <b>Guardianship of <i>(Name)</i>:</b>	
<b>NOTIFICATION OF CHANGE OF ADDRESS OF CONSERVATOR/GUARDIAN</b>	CASE NUMBER: _____

Current address and telephone number of the:

Conservator     Guardian

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(    ) \_\_\_\_\_

(If there is more than one conservator/guardian, please update the telephone numbers and addresses of all conservators/guardians who have moved.)