



CHANGE IN PERSONAL INFORMATION

Friend of the Court Address
203 S Niles Street, Paw Paw, MI 49079
Email: foc@vanburencountymi.gov

Court Telephone No.
(269) 657-7734
Fax: (269) 657-8282

Please type or print information. Complete only those sections that apply. You can only file changes for yourself or those minor children of whom you have physical custody. The information provided in this form will be used to update information in all of your Michigan Child Support Cases.

Name of party filing the change (type or print)	Social Security Number	Docket Number (If known)
Signature of party filing the change	Name of other party	Date of Filing

1. New Address and/or Telephone Number

Residential Address			Home Phone Number
City	State	Zip Code	Cell Phone Number

Mailing Address (If Different)	City	State	Zip Code
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Email Address:

2. **Alternate Address** The court has entered an order making my address confidential under Michigan Court Rule 3.203(F).
The following is an alternate address for the Court, the Friend of the Court Office, and the other party to use in serving me with notice and other court papers. I will retrieve all my mail regarding this case from this alternate address.

Street address	City	State	Zip Code
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3. Name Change

Previous Name	New Name
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4. New Employer/Source of Income

Employer/Source of Income	Street address		
City	State	Zip Code	Area Code & Telephone Number

5. New Driver License

Issuing State	License Number	Expiration Date
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6. **Other Information** (You can report information about the other parent here, or any other information as ordered by the Court)

Specify (attach additional paper if needed)
