

CLEVELAND HOUSING COURT – CHANGE OF ADDRESS

CASE NO. _____

Plaintiff

vs.

Defendant

Please PRINT all information. Form must be signed in space provided at bottom of form.

LAST NAME or BUSINESS NAME: _____

FIRST NAME (include Jr., Sr., etc.) _____

OLD Mailing Address: Address: _____

Apt. No. _____ P.O. BOX _____

City _____ State _____ Zip Code _____

Phone _____ Cell Phone _____

NEW Mailing Address: Address: _____

Apt. No. _____ P.O. BOX _____

City _____ State _____ Zip Code _____

Phone _____ Cell Phone _____

E-MAIL ADDRESS: _____

Other: _____

Signature: _____ Date: _____

Print Name: _____

Home Phone No. _____ Cell Phone _____