## CHANGE OF PERSONAL INFORMATION TUSCOLA COUNTY FRIEND OF THE COURT

\*\*You may only submit changes for yourself or the minor child(ren) for whom you have custody\*\* YOUR NAME (Print) SOCIAL SECURITY NUMBER CHANGE OF ADDRESS/CONTACT INFORMATION New Street Address\*: State: Zip code: Home Phone Number: Cell Phone Number Email Address: \_\_\_\_\_\_ \*If your address is *confidential*, you must complete the section below and provide an <u>alternative address</u> where you agree to receive all case related mail and correspondences. The other party will be provided with your alternative address for service purposes and correspondences. Also, if you have any other child support cases in Michigan, the alternative address will be used for correspondences and service. If you wish to have your address marked confidential, complete the section below. [ | (please check this box if applicable) I wish to have my new address marked *confidential*. I understand that I must provide the court with an "alternative address" where I agree to have all of my case related mail sent to. I also understand that my alternative address may be provided to the other party in this case and/or any other child support case I may have, even if that case is not in Tuscola County. My alternative address is: Street Address City State Zip Code YOUR CURRENT EMPLOYER Employer Name: \_\_\_\_\_\_ Street Address: \_\_\_\_\_ State: Zip Code: Employer Telephone Number (if known): **CHANGE OF NAME (if applicable)\*** Your New Name (Print): \_\_\_ \*You MUST provide legal documentation confirming your name change (ex: court order, marriage license, driver's license, or a social security card). Without this information, our office is not able to change your name. YOU MUST DATE AND SIGN THIS FORM Signature: Date: Return completed form to: Tuscola Friend of the Court, 440 N. State Street, Caro MI 48723 03/2016 \*CCHG\*