

Name of Person Filing: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Day/Evening Telephone: \_\_\_\_\_  
Attorney Bar Number (if applicable) \_\_\_\_\_  
Representing:  Self  Petitioner

**SUPERIOR COURT OF ARIZONA  
MOHAVE COUNTY**

In the Matter of the Estate of:

Case Number: \_\_\_\_\_

**NOTICE OF CHANGE OF ADDRESS**

\_\_\_\_\_  
 An Incapacitated Person  Minor

**NOTICE IS HEREBY GIVEN** that \_\_\_\_\_'s address has changed.

The new address and phone number are:

New Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

**The undersigned swear or affirm that the statements set forth above are true and correct, subject to the penalties of making a false affidavit or declaration.**

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Personal Representative

Case No: \_\_\_\_\_

Copies mailed this date to:

**Name**

**Address**

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