

CHANGE OF NAME/ADDRESS

CURRENT (PREVIOUS) NAME _____

NEW NAME _____

OLD ADDRESS _____

(STREET)

NEW ADDRESS _____

CITY

STATE

ZIP CODE

EFFECTIVE DATE _____

NAME OF OTHER PARTY _____

(DO NOT WRITE BELOW THIS LINE)

COURT CAUSE NUMBER _____ ISETS # _____

ID CHECKED: DRIVERS LICENSE _____ STATE ID _____ OTHER _____

CHANGES MADE IN JTS _____ BY _____ ISETS _____ BY _____

Please submit with copy of Driver's License or State ID to:

Elkhart County Clerk's Office, Support Desk,
Via facsimile at 574-523-2018 or

Mail to:
Elkhart County Clerk's Office, Support Desk,
315 S. 2nd Street,
Elkhart, Indiana 46516