

STATE OF LOUISIANA

IN THE INTEREST OF

DOCKET #: _____

JUVENILE COURT

PARISH OF JEFFERSON

STATE OF LOUISIANA

SECTION: “ ___ ”

NOTICE OF CHANGE OF ADDRESS

PLEASE TAKE NOTICE that the undersigned, _____
(juvenile/parent), has changed the following contact information:

Street Address

City State Zip Code

() _____
Home Phone Number

() _____
Work Phone Number

- I understand that Court and Clerk personnel will use the above address to issue service upon me.
- I understand that I can only change my own address, and not that of any other party.
- I understand that giving false information to the Court may subject me to criminal charges.

Signature

PLEASE SERVE BY US MAIL:

District Attorney’s Office
Juvenile Division