



SHINGLE SPRINGS BAND OF MIWOK INDIANS TRIBAL COURT  
P.O. Box 1340, Shingle Springs, CA 95682  
Telephone: (530) 698 – 1446  
Website: <https://www.shinglespringsrancheria.com/tribal-court/>

INFORMATION OF PERSON FILING FORM:

Name: \_\_\_\_\_

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

Phone: (     ) \_\_\_\_\_

(If applicable):

Attorney/Advocate for:

\_\_\_\_\_

CASE NO.: \_\_\_\_\_

**CHANGE OF ADDRESS FORM**  
[FOR COURT USE ONLY]

Name: \_\_\_\_\_

The following is my new address effective as of: (Month/Date/Year): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

This information is true and correct to the best of my knowledge:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date