UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA
325 West "F" Street, San Diego, California 92101-6991

ATTORNEY CHANGE OF INFORMATION FORM

To the Clerk of the United States Bankruptcy Court,

The undersigned attorney represents to the Court the following change of information:

[ ] new mailing address

[ ] change in firm association[1]

[ ] new street address

[ ] new telephone number

[ ] new e-mail address

Updated Information

Name of Attorney :_____

State Bar ID No. :_____

Firm Name: _____

Street Address :_____

Mailing Address :_____

City :_____

State :_____ ZIP CODE:_____

Phone No. :_____

E-Mail Address :_____

Dated:

_____
(Signature of Attorney)

[1]Substitution of Attorney required - see District Court Local Rule 83.3.g.