

SEMINOLE TRIAL COURT

Seminole Tribe of Florida

| | | |
|------------|---|----------|
| |) | Case No. |
| |) | |
| Plaintiff, |) | |
| |) | |
| vs. |) | |
| |) | |
| |) | |
| |) | |
| Defendant |) | |
| |) | |

DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS

I, *{full legal name}* _____, being sworn, certify that my current mailing address is: *{Street}* _____
{City} _____, *{State}* _____ *{Zip}* _____ *{Telephone No.}* _____
{Fax No.} _____.

I designate as my current e-mail address(es):

I understand that I must keep the clerk's office and the opposing party or parties notified of my current mailing and e-mail address(es) and that all future papers in this lawsuit will be served at the address(es) on record at the tribal court clerk's office.

I certify that a copy of this document was [check all used]: () e-mailed () mailed
() faxed

() hand-delivered to the person(s) listed below on *{date}* _____.

Other party or his/her attorney:

Name: _____
Address: _____
City: _____
State: _____
Zip: _____
Telephone Number: _____
Email Address(es): _____

Dated: _____

SIGNATURE OF PARTY

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and
signed before me on _____ by _____.

NOTARY PUBLIC OR DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

- ___ Personally known
- ___ Produced identification
- ___ Type of identification produced _____.

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the: *{choose only one}* () Petitioner
() Respondent

This form was completed with the assistance of:

{name} _____

{name of business} _____

{street} _____

{city} _____ *{state}* _____ *{zip}* _____

{telephone number} _____