UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

PLAINTIFF(S) v. DEFENDANT(S).	CASE NUMBER **NOTICE OF CHANGE OF ATTORNEY INFORMATION**

The following information must be provided:

I, _____, _____ , _____
Name *CA Bar ID Number* *E-mail Address*

☐ am counsel of record or ☐ out-of-state attorney in the above-entitled cause of action for the following party(s)

_____

_____

and am requesting the following change(s):

THIS SECTION MUST BE COMPLETED IF YOUR E-MAIL ADDRESS IS TO BE ADDED.
I ☐ consent ☐ do not consent to receive service of documents by electronic means in accordance with Fed. R. Civ. P. 5(b)(2)(E) and 77 (d), and Fed. R. Crim. P. 49(b)-(d).

SELECT THE CATEGORY AND COMPLETE THE INFORMATION REQUESTED:

☐ TO UPDATE NAME OR FIRM INFORMATION:

☐ I am providing the following new information pursuant to Local Rule 83-2.7 to be updated on the above-entitled cause of action.

PROVIDE ONLY THE INFORMATION THAT HAS CHANGED

Attorney Name changed to _____
New Firm/Government Agency Name _____
New Address _____
New Telephone Number _____ New Facsimile Number _____
New E-mail address _____

☐ TO BE ADDED AS COUNSEL OF RECORD: CHECK ONE BOX

☐ I am counsel of record in the above-entitled action and should have been added to the docket in this case. I made my first appearance in this case on _____

☐ This constitutes my Notice of Appearance to appear as counsel of record for the party(s) listed above in the above-entitled action.

IF YOUR FIRM IS **NOT** ALREADY PART OF THIS ACTION AND ARE ASSOCIATING IN AS COUNSEL OF RECORD A NOTICE OF ASSOCIATION SHOULD BE FILED. IF YOU ARE GOING TO APPEAR PRO HAC VICE, A SEPARATE APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE, G-64 MUST BE FILED.

Attorney Name _____ CA State Bar Number _____
Firm/Government Agency Name _____
Address: _____
Telephone Number _____ Facsimile Number _____
New E-mail address _____

☐ TO BE REMOVED FROM THE CASE: **

☐ I am ☐ the aforementioned attorney from my firm is no longer counsel of record in the above- entitled cause of action.

CHECK ONE BOX

☐ The order relieving me/the aforementioned attorney from my firm was filed on: _____.

☐ There is/are other attorney(s) from the undersigned attorney's law firm/government agency who are counsel of record in this case.

☐ I am ☐ the aforementioned attorney is no longer with the firm/government agency representing the above-named party in this action. There is/are attorney(s) from my former firm/government agency who are currently counsel of record in this case.

****This form *cannot* be used as a substitution of attorney form. For substitution of attorney procedures please refer to Local Rule 83-2.9 and form G-01, *Request for Substitution of Attorney* and G-01ORDER, *Order on Request for Substitution of Attorney.* At least one member of the firm/government agency MUST continue to represent and receive service for the parties indicated above in this action.**

Date: _____ _____

Signature of Attorney of Record / Attorney for the Firm

PLEASE NOTE: CM/ECF users must update their account information in the system pursuant to General Order 08-02, in addition to filing this Notice of Change of Attorney Information. A separate Notice must be filed in every pending case pursuant to Local Rule 83–2.7.