



IN THE GENERAL SESSIONS COURT  
FOR WILSON COUNTY, TENNESSEE

\_\_\_\_\_  
PLAINTIFF

VS.

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

\_\_\_\_\_  
DEFENDANT

**NOTICE OF ADDRESS  
CHANGE**

PLEASE TAKE NOTICE THAT THE CONTACT INFORMATION FOR: \_\_\_\_\_  
HAS CHANGED. THE FOLLOWING UPDATED CONTACT INFORMATION SHOULD BE USED  
FOR ALL FUTURE CORRESPONDENCE

FROM:

TO:

\_\_\_\_\_  
[ADDRESS]

\_\_\_\_\_  
[ADDRESS]

\_\_\_\_\_  
[APARTMENT / SUITE #]

\_\_\_\_\_  
[APARTMENT / SUITE #]

\_\_\_\_\_  
[CITY / STATE / ZIP CODE]

\_\_\_\_\_  
[CITY / STATE / ZIP CODE]

\_\_\_\_\_  
[PLAINTIFF] [or] [DEFENDANT]

\_\_\_\_\_  
[ADDRESS / SUITE #]

\_\_\_\_\_  
[CITY / STATE / ZIP CODE]

\_\_\_\_\_  
[TELEPHONE NUMBER]

SWORN TO AND SUBSCRIBED BEFORE ME, THIS  
\_\_\_\_\_, 2018

MY COMMISSION EXPIRES:

\_\_\_\_\_  
[CLERK / NOTARY]

BRING THE ORIGINAL COMPLETED SIGNED FORM TO THE WILSON COUNTY  
CRIMINAL JUSTICE CENTER AT 115 EAST HIGH ST., LEBANON, TN 37087 TO BE  
FILED WITH THE COURT THEN CERTIFY SERVICE TO THE OTHER PARTIES BELOW:

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY THAT A COPY OF THE FOREGOING *NOTICE* WAS MAILED/HAND-DELIVERED TO:

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ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_.

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PLAINTIFF / DEFENDANT / CLERK

IF YOU ARE THE PLAINTIFF OR DEFENDANT,  
YOU MUST COME IN PERSON AND SHOW YOUR IDENTIFICATION



TO REQUEST AN ADA ACCOMMODATION, PLEASE CALL (615)444-2042.