

CHANGE OF ADDRESS, NAME, or NEWBORN

Wolfchild, et al. v. United States

Address Change:

Today's Date: _____

Your full name as it presently appears on the Plaintiffs' list:*

(First) (Middle) (Last)

New Address--Complete **all** information:

Street: _____

City: _____ State: _____

Zip: _____ Phone Number: _____

Other family members identified as Plaintiffs living at this address (first, middle, last name):

Plaintiff Name Change: All name changes require a copy of the legal document reflecting the name change and must be faxed with the request for name change.

Name as it presently appears on Plaintiffs' list: _____

New full name:

(First) (Middle) (Last)

Newborns: Send both this completed form (identify name of child, name of plaintiff parent and current address) and a **copy of their certified birth certificate** to our office.

Name of Newborn: _____
(First) (Middle) (Last)

Please mail or fax to:

Mohrman & Kaardal, P.A.
33 South Sixth Street, Suite 4100
Minneapolis, Minnesota 55402

Fax: 612-341-1076
Phone: 1-866-629-1886

* Plaintiffs' list is found on www.mkclaw.com.