17TH JUDICIAL DISTRICT COURT

PARISH OF LAFOURCHE

STATE OF LOUISIANA		DIVISION ""	
VERSUS No.	_		
(DEFENDANT NAME – PRINT)			
DECLARATION OF ADDRESS	S CHANGE BY	Y DEFENDANT OR SURETY	
I,ADDRESS TO BE AS FOLLOWED:	_, DO HEREBY I	DECLARE MY CURRENT STREET	
DEFENDANT OR SURETY NAME (PRINT)		DATE OF BIRTH	
NUMBER/STREET ADDRESS APT. NO. (DO NOT PUT POST OFFICE BOX)			
CITY	STATE	ZIP CODE	
TODAY'S DATE	SIGNATURE OF DEFENDANT OR SURETY		

PURSUANT TO CODE OF CRIMINAL PROCEDURE ART. 329, THE DEFENDANT OR SURETY MUST FILE A WRITTEN DECLARATION OF EACH CHANGE OF ADDRESS.

IT IS YOUR OBLIGATION TO KEEP YOUR ADDRESS UP TO DATE WITH THE CLERKS OFFICE. PLEASE MAKE SURE YOUR ADDRESS IS CLEARLY WRITTEN ON THE FORM.