

IN THE STATE COURT OF COWETA COUNTY

P.O. BOX 884 NEWNAN, GEORGIA 30264

DEFENDANT CHANGE OF ADDRESS FORM

INSTRUCTIONS:

PLEASE PRINT OR TYPE

1. Complete online, save, print, sign, and mail to address above or
2. After signing you may E-File <https://ez-filing.net/georgia/>, if you E-File please use code ADF filing code.
3. File with the Clerk of State Court at: 72 Greenville Street, Newnan, Ga. 30263

Case#, Citation/Warrant #, Offense Date _____ (must be included for request to be processed)

Defendant's Name: _____

PLEASE NOTE THE FOLLOWING ADDRESS CHANGE:

	Mailing Address	Residence <input type="checkbox"/> Check if same as mailing
Street or P.O. Box		
City		
State and Zip		
Telephone		

_____ (Signature of Party Requesting Change) (Date)

FOR COURT USE ONLY:

Received By: _____

Solicitor's Box