

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name and Address</i> ):	TELEPHONE NO.:	<b>FOR COURT USE ONLY</b>
ATTORNEY FOR ( <i>Name</i> ):		
NAME OF COURT:		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
<b>CASE NAME:</b>		
<b>SUBSTITUTION OF ATTORNEY—CIVIL (Without Court Order)</b>	CASE NUMBER:	

THE COURT AND ALL PARTIES ARE NOTIFIED THAT (*name*): \_\_\_\_\_ makes the following substitution:

1. **Former legal representative**  Party represented self  Attorney (*name*):
2. **New legal representative**  Party is representing self\*  Attorney
  - a. Name:
  - b. State Bar No. (*if applicable*):
  - c. Address (*number, street, city, ZIP, and law firm name, if applicable*):
  - d. Telephone No. (*include area code*):

3. The party making this substitution is a  plaintiff  defendant  petitioner  respondent  other (*specify*):

**\*NOTICE TO PARTIES APPLYING TO REPRESENT THEMSELVES**

- Guardian
- Personal representative
- Guardian ad litem
- Conservator
- Probate fiduciary
- Unincorporated association
- Trustee
- Corporation

**If you are applying as one of the parties on this list, you may NOT act as your own attorney in most cases. Use this form to substitute one attorney for another attorney. SEEK LEGAL ADVICE BEFORE APPLYING TO REPRESENT YOURSELF.**

**NOTICE TO PARTIES WITHOUT ATTORNEYS**

**A party representing himself or herself may wish to seek legal assistance. Failure to take timely and appropriate action in this case may result in serious legal consequences.**

4. I consent to this substitution.  
Date: \_\_\_\_\_  
..... (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF PARTY)

5.  I consent to this substitution.  
Date: \_\_\_\_\_  
..... (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF FORMER ATTORNEY)

6.  I accept this substitution.  
Date: \_\_\_\_\_  
..... (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF NEW ATTORNEY)

(See reverse for proof of service by mail)

