

COMPLETING THE ADDRESS CHANGE NOTIFICATION AND CERTIFICATE OF MAILING

Use this form to inform the court of a change to the address and phone number of a ward/minor ward/protected person, a guardian and/or conservator, and/or an interested person.

TO THE GUARDIAN AND/OR CONSERVATOR OR THEIR ATTORNEY: You need to complete the Certificate of Mailing form and file it with the court showing that you mailed the required documents to all the interested persons you list.

Page 1 of 3

Choose the county using the drop-down list.

Enter the name of the ward, minor ward, or protected person.

Enter the case number.

Note who this change is for by checking the correct box. If this is for either the guardian, conservator, or interested person, list their name.

Enter the date of the change.

List the previous address and phone number.

List the new address and phone number.

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA
Choose the court

IN THE MATTER OF _____ Case No. _____

Ward/Minor Ward/Protected Person. **ADDRESS CHANGE NOTIFICATION AND CERTIFICATE OF MAILING**

This is a change of address for:

Ward/Minor Ward/Protected Person *

Guardian and/or Conservator:

(Name)

Interested Person:

(Name)

This change is effective as of: _____
(Date)

* REMINDER: The guardian or conservator is required to notify the court of the change of address of the ward, minor ward, or protected person and send notice to all interested persons.

PREVIOUS ADDRESS:

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Phone: _____

NEW ADDRESS:

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Phone: _____

Page 2 of 3

Sign the form, and enter your printed name, the date signed, your address, telephone number, and your email address.

If completed by an attorney, enter your Bar Number.

If there is a co-guardian or co-conservator, they will sign the form, and enter their printed name, the date signed, their address, telephone number, and email address.

Signature: _____ Date: _____
Printed Name: _____
(of guardian and/or conservator)
Street Address/P.O. Box: _____
City/State/ZIP Code: _____
Telephone Number: _____
Email address: _____
If completed by an attorney:
Bar Number: _____

Is there more than one guardian and/or conservator? yes no

Signature: _____ Date: _____
Printed Name: _____
(of co-guardian and/or co-conservator)
Street Address/P.O. Box: _____
City/State/ZIP Code: _____
Telephone Number: _____
Email address: _____
If completed by an attorney:
Bar Number: _____

Check the box if there is a co-guardian or co-conservator. If "yes" is checked, the second signature block appears.

Enter the case information including the name, county, and case number.

Enter the date the copies of the forms were sent.

Check the box if there are more names and addresses than these and list them on a separate page.

If completed by an attorney, enter your Bar Number.

If there is a co-guardian or co-conservator, they will sign the form, and enter their printed name, the date signed, their address, telephone number, and email address.

Ward/Minor Ward/Protected Person
Choose the county _____
County Court Case No. _____

CERTIFICATE OF MAILING

I swear or affirm, under the penalties of perjury, that on _____, I mailed copies of the Address Change Notification (CC 16:2.46) to all interested persons and bonding company, if any, at the addresses set forth below:

NAME(S) OF INTERESTED PERSON(S)	ADDRESS(ES)
_____	_____
_____	_____
_____	_____

See attached (more names and addresses than above)

Signature: _____ Date: _____
Printed Name: _____
(of guardian and/or conservator or their attorney)
Street Address/P.O. Box: _____
City/State/ZIP Code: _____
Telephone Number: _____
Email address: _____
If completed by an attorney:
Bar Number: _____

Is there more than one guardian and/or conservator? yes no

Signature: _____ Date: _____
Printed Name: _____
(of co-guardian and/or co-conservator or their attorney)
Street Address/P.O. Box: _____
City/State/ZIP Code: _____
Telephone Number: _____
Email address: _____
If completed by an attorney:
Bar Number: _____

List the names and addresses of the interested person(s).

Sign the form, and enter your printed name, the date signed, your address, telephone number, and your email address.

Check the box if there is a co-guardian or co-conservator. If "yes" is checked, the second signature block appears.

* Pursuant to [Neb. Rev. Stat. § 30-2601](#), interested persons are defined as:

- children and spouses;
- future heirs if the ward/incapacitated person/protected person would die without leaving a valid will (brothers and sisters who are adults, grandparents, etc.);
- a trustee of any trust executed by the ward/incapacitated person/protected person;
- if there are no individuals defined as “interested persons” above, include any person or organization named as a “devisee” in the ward’s/incapacitated person’s/protected person’s most recent will;
- after death of the ward/incapacitated person/protected person, interested person also includes the personal representative of a deceased ward’s/incapacitated person’s/ protected person’s estate, the deceased ward’s/incapacitated person’s/protected person’s heirs in an intestate estate, and the deceased ward’s/incapacitated person’s/protected person’s devisees in a testate estate;
- any governmental agency paying benefits on behalf of the ward/incapacitated person/protected person; and
- any person designated by order of the court to be an interested person.

If there are no interested persons identified for a ward/incapacitated person/protected person, the court may appoint a guardian ad litem (Nebraska Supreme Court Rule § 6-1449(B)). The cost of the guardian ad litem may be taken from the assets of the ward/incapacitated person/protected person.