

PARTY INFORMATION: NAME: ADDRESS: CITY, STATE, ZIP: TELEPHONE NO: FAX NO. (Optional): EMAIL ADDRESS (Optional):	
SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ 1 Second Street, Room 300 Watsonville, CA 95076 Watsonville Branch	
PLAINTIFF/PETITIONER: vs. DEFENDANT/RESPONDENT:	
ORDER TO AMEND NAME AFTER JUDGMENT	CASE NUMBER:

GOOD CAUSE APPEARING, the court orders the incorrect name(s) on the judgment entered on

_____ amended from _____
to _____.

DATE: _____
_____ Judicial Officer

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this cause and that a copy of the foregoing request was mailed, first-class postage fully prepaid, in a sealed envelope addressed as shown below, and that the request was mailed at (place): _____, California on (date): _____.

Γ	Γ	Γ	Γ
L	J	L	J
Γ	Γ	Γ	Γ
L	J	L	J

See attached sheet for additional parties.

Date: _____ Clerk of the Court by _____ Deputy Clerk