

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

I am the Attorney for the Plaintiff/Petitioner Defendant/Respondent and my Utah Bar number is _____

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

_____	Substitution of Counsel Case Number _____ Judge _____ Commissioner _____
Plaintiff/Petitioner	
v.	

Defendant/Respondent	

(1) Under URCP 74, I notify the court, counsel and parties that I am replacing _____ (name or lawyer) as counsel for _____ (name or client).

(2) I will comply with the existing hearing schedule and deadlines.

Date _____	Date _____
Sign here ► _____	Sign here ► _____
Name of former counsel _____	Name of new counsel _____
Date _____	
Sign here ► _____	
Name of client _____	

Certificate of Service

I certify that I served a copy of this Substitution of Counsel on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date _____

Sign here ► _____

Typed or printed name _____