SUPREME COURT OF THE COUNTY OF NASSAU			
[2. Fill in name(s)] -against-	Plaintiff(s)/Petitioner(s)		[1. Index No. & Year] index No. / CONSENT TO CHANGE ATTORNEY
[3. Fill in name(s)]	Defendant	, (s)/Responder	at(s)
IT IS HEREBY STIPULATED plaintiff/ defendant in the ab [5. Fill in attorney information NAME OF INCOMING ATTO (Party Name if unrepresented ADDRESS	D AND AGREED ove-entitled action tion] DRNEY	that the repres	sentation of the [4. Circle one] anged as follows.
PHONE/FAX			
[6. Fill in attorney informat NAME OF OUTGOING ATT			
ADDRESS			
PHONE/FAX [7. Date] Dated:			
[8. Incoming Attorney Signature]		[9. Outgoin	g Attorney Signature]
[I0. Print Name]		[11. Print Name]	
[12. Client Signature]			
[13. Print Name]			