

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>
ATTORNEY FOR (Name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL</b>		
COURTHOUSE ADDRESS:		
PLAINTIFF:		
DEFENDANT:		
<b>AMENDMENT TO COMPLAINT (Fictitious /Incorrect Name)</b>		CASE NUMBER:

**FICTITIOUS NAME (Order required)**

Upon the filing of the complaint, the plaintiff, being ignorant of the true name of the defendant and having designated the defendant in the complaint by the fictitious name of:

FICTITIOUS NAME
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and having discovered the true name of the defendant to be:

TRUE NAME
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amends the complaint by substituting the true name for the fictitious name wherever it appears in the complaint.

DATE	TYPE OR PRINT NAME	SIGNATURE OF ATTORNEY
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**INCORRECT NAME (Order required)**

The plaintiff, having designated a defendant in the complaint by the incorrect name of:

INCORRECT NAME
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and having discovered the true name of the defendant to be:

TRUE NAME
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amends the complaint by substituting the true name for the incorrect name wherever it appears in the complaint.

DATE	TYPE OR PRINT NAME	SIGNATURE OF ATTORNEY
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**ORDER**

THE COURT ORDERS the amendment approved and filed.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Judicial Officer