



Change of Information Sheet

If you need to let the COPS Office know about changes or corrections, please type or print the information on this sheet and submit it to the COPS Office. In addition to the changed or corrected information, always indicate your organization's name on this sheet. **Changes of grant executives will not relieve the grantee entity of its obligations under this grant.**

Organization's Legal Name: _____

ORI: _____

Law Enforcement Executive Name (Title, First Name and Last Name)

Address: _____

City: _____

State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Government Executive Name (Title, First Name and Last Name)

Address: _____

City: _____

State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Contact Name (Title, First Name and Last Name)

Name of individual submitting this Change of Information form (Name and Title):

Date: _____