General Civil Case Filing Information Form (Non-Domestic)

Court ☐ Superior ☐ State		(County Docket #			MM-DD-YYYY				
		D								
Plaintiff(s)					Def	Defendant(s)				
Last	First	Middle I.	Suffix Prefix	Maiden	Last	First	Middle I.	Suffix Prefix	Maiden	
Last	First	Middle I.	Suffix Prefix	Maiden	Last	First	Middle I.	Suffix Prefix	Maiden	
Last	First	Middle I.	Suffix Prefix	Maiden	Last	First	Middle I.	Suffix Prefix	Maiden	
Last	First	Middle I.	Suffix Prefix	Maiden	Last	First	Middle I.	Suffix Prefix	Maiden	
No.	of Plaintiffs				No.	No. of Defendants				
Last	ntiff/Petitioner First		Middle I.	Pro Se Suffix						
Check Primary Type (Check only ONE)						If Tort is Case Type: (Check no more than TWO)				
	Contract/Acco	ount				☐ Auto Accident				
						☐ Premises Liability				
	1 2					☐ Medical Malpractice				
	1		SS			☐ Other Professional Negligence				
	1 3					☐ Product Liability				
	Equity					☐ Other Specify				
	Habeas Corpus									
	Appeals, Revi	1	4	A	re Punitiv	e Damages Pl	eaded? □	Yes □ No		
	Post Judgement Garnishment, Attachment, or Other Relief					, and the second				
	Non-Domestic	Contemp	ot							
	Tort (If tort, fill in right column)					☐ I hereby certify that the documents in this filing (including attachments and exhibits) satisfy the				
	Other General Civil Specify					requirements for redaction of personal or confidential information in O.C.G.A. 9-11-7.1				
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