

CONFIDENTIAL Case Information Sheet

Fill out this form to start a **General Civil Law** case.

The information you give us is **private**.

Case Number (Clerk fills in case #):

Exempt from Public Disclosure

DO NOT SERVE THIS DOCUMENT ON OTHER PARTIES

Complete this form for each of the parties for whom you are submitting this initial pleading. It is not necessary to provide information about other parties.

The personal identifiers collected by the Court below are collected for the purpose of ensuring that the Court's party records are accurate and to better differentiate individuals or businesses with common names. It will be used for this purpose alone and will not be disclosed to the public including the parties in the subject lawsuit.

Information about Party

Name:
First Middle Last

Legal name of business entity:

Any other names used:

Address:
Street City State Zip

Mailing Address (if different):

Phone numbers: Home Work Cell

Email:

Driver's License: State Number Date of Birth:

If the accompanying pleading is filed on behalf of more than one party, provide information regarding those additional parties below.

Information about Party

Name:
First Middle Last

Legal name of business entity:

Any other names used:

Address:
Street City State Zip

Mailing address (if different):

Phone numbers: Home Work Cell

Email:

Driver's License: State Number Date of Birth:

COMPLETE INFORMATION FOR ADDITIONAL PARTIES ON ADDITIONAL PAGE(S) IF NECESSARY