

CONFIDENTIAL CASE FILING INFORMATION SHEET – NON-DOMESTIC RELATIONS**YOU WILL BE SIGNED UP FOR****[TRACK THIS CASE TO FOLLOW MO CASE.NET](http://TRACKTHISCASE.TOFOLLOWMOCASE.NET)****INSTRUCTIONS:**

- ✓ Complete this form for all parties known at the time of filing. Provide the most appropriate Case Type and Party Type codes and descriptions. (Found on the Case Types List and Party Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)
- ✓ If additional space is needed, complete additional Confidential Case Filing Information Sheets.

NOTE: The **full** Social Security Number (SSN) is **required** pursuant to Missouri Supreme Court Operating Rule 4.07 if the party is a person and is reasonably available. This is a confidential document. This information is needed to open a case in the court's case management system. While cases deemed public under Missouri statutes can be accessed through Case.net, the day and month of birth, SSN, and confidential addresses are NOT provided to the public through Case.net.

Filing Date: _____ County of: ColeStyle of Case: _____
(i.e. In the Estate of; In the Matter of; Petitioner v. Respondent.)

Case Type Code: _____ Case Type Description: _____

Party Type Code: <u>PETP</u> Party Type Description: <u>Petitioner Acting Pro Se</u>	
Name (if a person): (Last) _____ (First) _____ (Middle) _____	
Organization (if _____ non-person): _____	
Address: _____	
City: _____	
State: <input type="checkbox"/>	Zip: _____ Contact Telephone Number: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN: _____	
Party Type Code: <u>RES</u> Party Type Description: <u>Respondent</u>	
Name (if a person): (Last) _____ (First) _____ (Middle) _____	
Organization (if _____ non-person): _____	
Address: _____	
City: _____	
State: <input type="checkbox"/>	Zip: _____ Contact Telephone Number: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN: _____	
Contact Phone Provider: _____ Email Address: _____	
<small>(example AT&T)</small>	
Party Type Code: _____ Party Type Description: _____	
Name (if a person): (Last) _____ (First) _____ (Middle) _____	
Organization (if _____ non-person): _____	
Address: _____	
City: _____	
State: <input type="checkbox"/>	Zip: _____ Contact Telephone Number: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN: _____	
Contact Phone Provider: _____ Email Address: _____	
<small>(example AT&T)</small>	

Petitioner's Signature: _____

Contact Phone Provider: _____ Email Address: _____
(example AT&T)***IMPORTANT:** It is the parties' responsibility to keep the court informed of any change of address or employment.*

Pro Se Rent & Possession

Filing Fee - \$57

**Service Fee - \$30 check or money order made out to the Cole County Sheriff Department
IF SERVICE IS IN COLE COUNTY.**

- **If service is outside of Cole County it is your responsibility to contact the counties sheriff department and obtain the correct service fee.**
 - **You will then include the check or money order with your filing made out to the correct sheriff's department.**